

P010000013092

TRANSMITTAL LETTER

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
P.O. BOX 6327  
TALLAHASSEE, FL 32314

700003630947--7  
-02/02/01--01094--027  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: Longevity Research Center of Central Florida, Inc.

Enclosed are an original and one (1) copy of the Articles of Incorporation and a check for:

_____	\$70.00
	Filing Fee
<u>  X  </u>	\$78.75
	Filing Fee & Certificate
_____	\$122.50
	Filing Fee & Certified Copy
_____	\$131.25
	Filing Fee, Certified Copy & Certificate

FROM:

Longevity Research Center of Central Florida, Inc.  
10000 W. Colonial Dr.  
Suite 289  
Ocoee, FL 34761

FILED  
01 FEB -2 PM 2:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one (1) copy of the Articles.

✓

gys/s

## **ARTICLES OF INCORPORATION**

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

### **ARTICLE I - NAME**

The name of the corporation shall be Longevity Research Center of Central Florida, Inc.

### **ARTICLE II - PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation to be located at Is 10000 W. Colonial Dr., Suite 289, Ocoee, FL 34761.

### **ARTICLE III - SHARES**

The number of stock that this corporation is authorized to have outstanding at any one time Are One Thousand (1,000) shares, (Common Stock), One Dollar, (\$1) par value per share. Antonio Caos will own One Thousand shares of the corporation.

### **ARTICLES IV- INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

Antonio Caos  
10000 W. Colonial Dr.  
Suite 289  
Ocoee, FL 34761

### **ARTICLE V - TERM OF EXISTENCE**

This corporation is to exist perpetually.

### **ARTICLE VI - DIRECTORS**

All corporate powers shall be exercised by or under the authority of, and the business and affairs of the corporation managed under the direction of its Board of Directors, subject to any limitation set forth in these Articles of Incorporation. This corporation shall have one Director. The name and address of the initial member of the Board of Directors is:

Antonio Caos  
10000 W. Colonial Dr.  
Suite 289  
Ocoee, FL 34761

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TALLAHASSEE, FLORIDA

## ARTICLE VII - OFFICERS

The name and address of the initial officers of the corporation who shall hold office for the first year of the corporation or until their successor is elected or appointed are:

Antonio Caos  
President/Secretary  
10000 W. Colonial Dr.  
Suite 289  
Ocoee, FL 34761

## ARTICLE VIII- PREEMPTIVE RIGHTS

The corporation elects to have preemptive rights.

## ARTICLE IX - INCORPORATOR(S)

The name and street address of the incorporator(s) to these Articles of Incorporation is:

Antonio Caos  
10000 W. Colonial Dr.  
Suite 289  
Ocoee, FL 34761

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 28  
day of January 2001.

(An additional article must be added if an effective date is requested.)

Signature: \_\_\_\_\_

Antonio Caos

Notarization is not required.

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATION OF DESIGNATION OF REGISTERED AGENT/REGISTERED  
OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE  
UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAW OF THE STATE OF  
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE  
REGISTERED OFFICER/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1) Name of the corporation is:


Longevity Research Center of Central Florida, Inc.

2) The name and address of the registered agent office is:

Antonio Caos  
10000 W. Colonial Dr.  
Suite 289  
Ocoee, FL 34761

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Having been named as registered agent and to accept service of process for the above-stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

  
Signature

1-28-01  
Date

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314