TRANSMITTAL LETTER

01 MAR 12 PM 4:16

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00 Filing Fee

Ø\$₹8.75 Filing Fee

& Certificate of Status

\$78.75

\$87.50

Filing Fce

Filing Fce,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

1850 SW 8. STREET SUITE 204 F

Misser FC 33 135

City, State & Zip

| 305| 785 - 2080 or 643 - 682 |

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORA LONGER LIFE, INC.

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: LONGER LIFE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

2370 ALIBABA AVE OPA-LOCKA FL. 33054

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

> 500 shares of comom stock having par value of \$ 1.00 per share

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

DAVID ALLEN McPHERSON 1020 SW 88 WAY PEMBROKE PINES, FL. 33025

ARTICLE V INCORPORATOR(S)

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

DAVID ALLEN MCPHERSON 1020 SW 88 WAY PEMBROKE PINES, FL. 33025

23	day of	FEBRUARY	01	
	2.7	NA Signature	1	
		Signature		
<u></u>		Signature		

Articles of Incorporation Filing Fee -

CERTIFICATE OF DESIGNATION OF 12 PM 4: 16 REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name	e of the corporation is:	LONGER L	IFE,	INC.	-		
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2	The	, 						
۷.	ine name	e and address of the regi	stered agent	and o	ffice is:			
(Name)								
		1020 SW 88	, WAY		•			
(P.O. Box not acceptable)								
		PEMBROKE P	INES, FL.	330	25			
	·	!	(City/State/Zip)		· · · · · · · · · · · · · · · · · · ·		-	
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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 I am familiar with and accept the obligations of my position as registered agent.

(Signature)

02/23/01

(Date)