ZARUS CORPORATE FILING SERVICE 3320 S.W. 87 AVENUE (Address) MIAMI, FLORIDA (305)552-5973 (City, State, Zip) TERESA ROMAN (TALLAHASSEE REPRESENTATIVE) OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Document #) (Document #) (Comoration Name) (Document #) (Corporation Name) (Document #) Rick up time 200 Walk in Certified Copy Mail out Will wait Photocopy Certificate of Status AMENDMENTS NEW FILINGS Profit Amendment NonProfit Resignation of R.A., Officer/Director Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/ OTHER FILNGS QUALIFICATION **Annual Report** Foreign **Fictitious Name** Limited Partnership Name Reservation Reinstatement Trademak

Other

Examiner's Initials

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: MY LIFE INC.

ARTICLE II PRINCIPAL OFFICE

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

6624 S.W 114 PLACE SUITE #C

MIAMI, FL 33173

ARTICLE III SHARES

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

Ten shares @ \$100.00 par value

ARTICLE IV INITIAL REGISTERED AGENT

The name and Florida address of the initial registered agent is:

ALEJANDRO MORALES 6624 S.W 114 PLACE SUITE #C MIAMI, FL 33173

ARTICLE V INCORPORATOR(S)

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

ALEJANDRO MORALES 6624 S.W 114 PL	ACE SUITE #C MIAMI, FL 33173
	,
	3-77-01
Signature /Incorporator	Date

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 / Registered Agent Date