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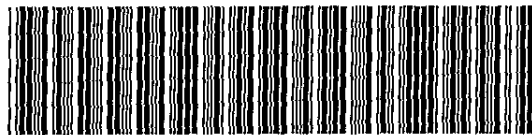
Lynn Reynolds **GAVE** ✓

AUTHORIZATION BY PHONE TO

CORRECT Shares

DATE 10-2-03

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

203-28178
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TRANSMITTAL LETTER

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

SUBJECT: Home Fitness Solutions, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

<input type="checkbox"/> \$70.00	<input checked="" type="checkbox"/> \$78.75
Filing Fee	Filing Fee & Certificate of Status

<input type="checkbox"/> \$78.75	<input type="checkbox"/> \$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status

ADDITIONAL COPY REQUIRED

FROM: Lynn M. Reynolds
Name (Printed or typed)

640 Clayton Street
Address

Orlando, FL 32804
City, State & Zip

407-425-7894
Daytime Telephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Home Fitness Solutions, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

640 Clayton Street, Orlando, FL 32804

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide personal fitness training services.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Lynn Reynolds, Owner, President
Samuel D. Reynolds, Treasurer

ARTICLE VI REGISTERED AGENT

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

Lynn Reynolds, 640 Clayton Street, Orlando, FL 32804

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lynn Reynolds, 640 Clayton Street, Orlando, FL 32804

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Lynn Reynolds
Signature/Registered Agent

9/24/03

Date

Lynn Reynolds
Signature/Incorporator

9/24/03

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA