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Division of Corporations

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Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255
Phone: (305)634-3694
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FLORIDA PROFIT CORPORATION OR P.A.

lisa saponaro ph d, inc.

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ARTICLES OF INCORPORATION

The undersigned incorporator, 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 is: Lisa Saponaro Ph D, Inc.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 10661 NW 14th Street - # 234 Plantation, FL 33322

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 50,000

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: Lisa Saponaro 10661 NW 14th Street - # 234 Plantation, FL 33322

ARTICLE V - DURATION

This corporation shall have a perpetual existence.

ARTICLE VI - INDEMNIFICATION

The corporation shall indemnify any officer or director or any former officer or director to the full extent permitted by law.

ARTICLE VII - AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these articles of incorporation, of any amendment thereto, and any right conferred upon the shareholders is subject to this reservation.

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ARTICLE VIII - INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) director initially. The number of directors may be increased from time to time by the By-Laws but shall never be less than one (1). Lisa Saponaro 10661 NW 14th Street - # 234 Plantation, FL 33322

ARTICLE IX - INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are: Lisa Saponaro 10661 NW 14th Street - # 234

Plantation, FL 33322

James 2.17-5

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

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