

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000155733

FILED
Nov 29, 2008
Secretary of State

Entity Name: LYFE MANAGEMENT GROUP, INC.

Current Principal Place of Business:

15921 SW 20TH STREET
MIRAMAR, FL 33027 US

New Principal Place of Business:

11825 ISLAND LAKES LANE
BOCA RATON, FL 33498 US

Current Mailing Address:

P.O. BOX 566022
MIAMI, FL 33256 US

New Mailing Address:

P.O. BOX 824114
SOUTH FLORIDA, FL 33082 US

FEI Number: 20-8093462

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WRAY, JULIEN
11825 ISLAND LAKES LN
BOCA RATON, FL 33498 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JULIEN WRAY

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WRAY, JULIEN
Address: P.O. BOX 566022
City-St-Zip: MIAMI, FL 33256 US

Title: S/T () Delete
Name: WRAY, STEPHANIE
Address: P.O. BOX 566022
City-St-Zip: MIAMI, FL 33256 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WRAY, JULIEN
Address: P.O. BOX 824114
City-St-Zip: SOUTH FLORIDA, FL 33082 US

Title: S/T (X) Change () Addition
Name: WRAY, STEPHANIE
Address: P.O. BOX 824114
City-St-Zip: SOUTH FLORIDA, FL 33082 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JULIEN WRAY

Electronic Signature of Signing Officer or Director

PRES

11/29/2008

Date