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LAZARUS CORPORATE FILING SERVICE

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CORPORATION NAME(S) & DOCUM	MENT NUMBER(S), (if knewn):
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NEW FILINGS	AMENDMENTS
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUAL IFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other
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Examiner's Initials

CR2E031(7/97)

ARTICLES OF INCORPORATION

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 1 - NAME

The name of the corporation shall be:

Millenium Natural Health Products Group, INC

ARTICLE II - PRINCIPAL OFFICE

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

10575 NW 37th Terrace. Hiami, Fl 33178. SECRETARY OF STATE
TALLAHASSEE, FLORDA

ARTICLE III – SHARES

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

100 Shares

ARTICLE IV – REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Ada L. de Ovesada 10575 NW 37th Terrace Miani, Florida 33178

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

ADA L. de Quesada 10575 NW 37th Torrace Miani, Florida 33178

The undersigned incorporator has executed these Articles of Incorporation this 13 day of May 2008

ARTICLE VI - DIRECTOR(S)

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

ADA L. de Ousale, President. 10575 NW 37th Terrace Hiami, Fl 33178.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent's Signature