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2009 JAN 27 PM 12:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

28

DATE

1124/09

STATE OF FLORIDA  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
P. O. BOX 6327  
TALLAHASSEE, FLORIDA 32314

RE: VITAL TECHNOLOGY LABORATORIES, INC.

GENTLEMEN:

ENCLOSED HERewith ARE THE ARTICLES OF INCORPORATION  
TOGETHER WITH A COPY OF SAID ARTICLES FOR VITAL TECHNOLOGY  
LABORATORIES, INC. AND OUR CHECK IN THE AMOUNT OF \$ 78.75  
AS FOLLOWS:

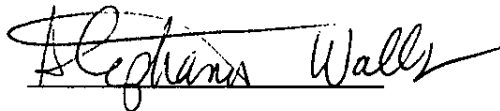
FILING FEE	\$ 35.00
CHARTER TAX	-
REGISTERED AGENT	35.00
CERTIFIED COPY	8.75

\$ 78.75

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RESPECTIVELY SUBMITTED,

INDV



CORP

VITAL TECHNOLOGY LABORATORIES, INC.

CERTIFICATE OF INCORPORATION

of

VITAL TECHNOLOGY LABORATORIES, INC.

WE, THE UNDERSIGNED, hereby associate ourselves together for the purpose of becoming a corporation under the laws of the State of Florida, by and under the provisions of the Statutes of the said State of Florida.

ARTICLE I

The name of this corporation shall be:

VITAL TECHNOLOGY LABORATORIES, INC.

ARTICLE II

The corporation may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

ARTICLE III

The maximum number of shares of capital stock that this corporation is authorized to have outstanding at any one time is FIVE HUNDRED (500) shares of common stock, having a par value of ONE (\$1.00) DOLLAR PER SHARE.

ARTICLE IV

The amount of capital with which this corporation will begin business shall be the sum of not less than FIVE HUNDRED (\$500.00) DOLLARS.

ARTICLE V

This corporation shall exist perpetually unless sooner dissolved according to law.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Article VI

The initial street address of the principal office of the corporation shall be:

10790 CAMERON COURT #208  
DAVIE, FL 33324

ARTICLE VII

The number of Directors of this corporation shall be at least one (1) and no more than five (5).

ARTICLE VIII

The names and street addresses of the members of the first Board of Directors of this corporation are as follows:

STEPHANIE A. WALLS	10790 CAMERON COURT, #208
	DAVIE, FL 33324

ARTICLE IX

The names and street addresses of the persons signing these Articles of Incorporation as subscriber is as follows:

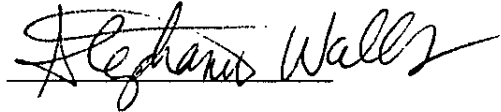
STEPHANIE A. WALLS	10790 CAMERON COURT, #208
	DAVIE, FL 33324

ARTICLE X

The corporate existence of this corporation shall begin on the date the Articles of Incorporation are filed of record.

IN WITNESS WHEREOF, the undersigned, **STEPHANIE A. WALLS,**

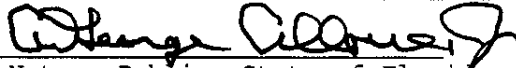
Being a natural person, competent to contract, has hereunto  
set her hand and seal this 24 day of JAN, 2009.



STATE OF FLORIDA)  
                                  )SS  
COUNTY OF BROWARD)

BEFORE ME, the undersigned Notary Public of the State of  
Florida personally appeared **STEPHANIE A. WALLS,** to me well  
known and known to me to be the individual described in  
and who executed the foregoing Articles of Incorporation,  
and she acknowledged before me that she executed the same  
freely and voluntarily for the purpose therein expressed.

WITNESS my hand and official seal this 24 day of JAN  
2009.



Notary Public, State of Florida  
My commission expires:

(Notary Seal)



**A. GEORGE ALLOCCA, JR.**  
MY COMMISSION # DD 418124  
EXPIRES: August 13, 2009  
Bonded Thru Budget Notary Services

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE  
FOR THE SERVICE OF PROCESS WITHIN THIS STATE,  
NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

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In pursuance of Chapter 48.091, Florida Statutes, the  
following is submitted in compliance with said Act:

FIRST: That **VITAL TECHNOLOGY LABORATORIES, INC.** desiring to  
organize under the Laws of the State of Florida with its  
principal offices as indicated in the Articles of  
Incorporation, in the City of **DAVIE**, County of **BROWARD**  
State of Florida, has named **STEPHANIE A. WALLS** located at  
**10790 CAMERON CT., # 208, DAVIE**, Florida, as its agent to accept  
services of process within this State.

ACKNOWLEDGEMENT

Having been named to accept services of process for the  
above stated corporation, at the place designated in this  
certificate, I hereby accept to act in this capacity, and  
agree to comply with the provisions of said Act relative to  
keeping open said office.

By: 

Resident Agent

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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