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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JAN 11 2010

D. A. WHITE

## COVER LETTER

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

SUBJECT: DOMESTICATION OF CORPORATION

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

**FEES:**

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ <u>78.75</u>
Total to domesticate and file	\$128.75

**OPTIONAL:**

Certificate of Status	\$ 8.75
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TAREGAN ELIAN  
Name (printed or typed)

2881 EAST OAKLAND PARK BLVD # 419  
Address

FT. LAUDERDALE , FL 33306  
City, State & Zip

561 633 9594  
Daytime Telephone Number

info@solpinc.com  
E-mail address: (to be used for future annual report notification)

# CERTIFICATE OF DOMESTICATION

FILED

The undersigned, TAREGAN ELIAN, VICE PRES.,  
(Name) (Title)

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of Spice Of Life Pharmacy & Gifts, Inc. a foreign corporation,  
(Corporation Name)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

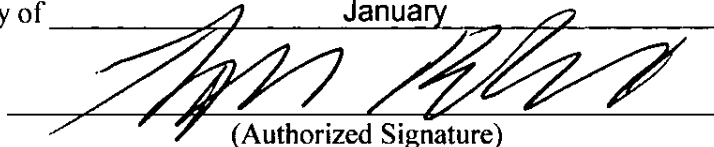
in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was December 21, 1983.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was COLORADO.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Spice Of Life Pharmacy & Gifts, Inc..
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 607.0202 and 607.0401 with this certificate is SOLP, Inc.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was ~~SPICE OF LIFE PHARMACY & GIFTS, INC.~~ COLORADO.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am VICE PRES., of Spice Of Life Pharmacy & Gifts, Inc.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done

so this the 5 day of January, 2010.

  
(Authorized Signature)

## Filing Fee:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total to domesticate and file	\$128.75

**ARTICLES OF INCORPORATION**  
IN COMPLIANCE WITH CHAPTER 607, F.S.

**ARTICLE I NAME**

THE NAME OF THE CORPORATION SHALL BE:

SOLP, INC.

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**ARTICLE II PRINCIPAL OFFICE**

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

2881 EAST OAKLAND PARK BLVD #419, FT. LAUDERDALE, FL 33306

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE III PURPOSE**

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:  
ANY AND ALL LAWFUL BUSINESS

**ARTICLE IV SHARES**

THE NUMBER OF SHARES OF STOCK IS:  
20,000

**ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS**

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

GARY BUSS - 2881 E. OAKLAND PK BLVD # 419 FT LAUDERDALE 33306- PRESIDENT  
TAREGAN ELIAN 2881 E. OAKLAND PK BLVD #419 FT LAUDERDALE 33306 - VP

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX **NOT** ACCEPTABLE) OF THE REGISTERED AGENT IS:  
TAREGAN ELIAN - 2881 E. OAKLAND PK BLVD #419- FT LAUDERDALE 33306

**ARTICLE VII INCORPORATOR**

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

TAREGAN ELIAN - 2881 E. OAKLAND PK BLVD #419 FT. LAUDERDALE 33306

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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 AM FAMILIAR WITH AND  
ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.

Signature/Registered Agent:

Date:

Signature/Incorporator

Date: