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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**AFFIDAVIT OF SUE GIMENO, F/K/A SUE DILENGE, DIRECTOR OF
LIFETIDES HOME, INC. A FLORIDA PROFIT CORPORATION**

Before me, the undersigned authority, personally appeared SUE GIMENO, f/k/a Sue Dilege, who upon being duly sworn, deposes and says as follows:

1. That I am over the age of eighteen (18) years and have personal knowledge of the factual matters set forth herein.
2. That I am a Director of LIFETIDES HOME, INC., a Florida not for profit corporation, Florida Department of State Document Number N99000002453.
3. That I am authorized to make this Affidavit on behalf of Lifetides Home, Inc., in support of Lifetides Home, Inc.'s Articles of Dissolution to which this Affidavit is attached.
4. That I have read the Articles of Dissolution of Lifetides Home, Inc., filed in this matter, and am familiar with the corporate subject matter thereof as well as the proposed Articles of Incorporation for Lifetides Home, Inc. a Florida profit corporation.
5. That LIFETIDES HOME, INC., a Florida not for profit corporation, Florida Department of State Document Number N99000002453, has no intention of revoking its voluntary dissolution and releases its name to Lifetides Home, Inc., a Florida profit corporation which proposed Articles of Incorporation are enclosed herewith.

FURTHER AFFIANT SAYETH NOT.

LIFETIDES HOME, INC.,
a Florida not for profit corporation

Sue Gimeno

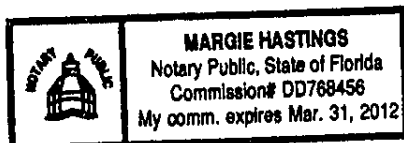
SUE GIMENO f/k/a SUE DILENGE, DIRECTOR

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STATE OF FLORIDA)
COUNTY OF ~~PIKE~~ ~~INDIAN~~) PASCO.

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared SUE GIMENO as Director of LIFETIDES HOME, INC., a Florida not for profit corporation, who is personally known to me, who executed the foregoing Affidavit and acknowledged before me that he executed the same, and who did take an oath.

WITNESS my hand and official seal in the County and State last aforesaid this 17th day of October 2011.



Margie Hastings
NOTARY PUBLIC

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME LIFETIDES HOME, INC.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
3133 LAS OLAS DRIVE
DUNEDIN FL 34698 US

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

| | |
|----------------------------------|-----------------------|
| Name and Title: SUE GIMENO, P. D | Name and Title: _____ |
| Address: 3133 LAS OLAS DRIVE | Address: _____ |
| DUNEDIN FL 34698 US | _____ |
| _____ | _____ |
| Name and Title: _____ | Name and Title: _____ |
| Address: _____ | Address: _____ |
| _____ | _____ |
| _____ | _____ |
| Name and Title: _____ | Name and Title: _____ |
| Address: _____ | Address: _____ |
| _____ | _____ |
| _____ | _____ |

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: SUE GIMENO
Address: 3133 LAS OLAS DRIVE
DUNEDIN FL 34698 US

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: SUE GIMENO
Address: 3133 LAS OLAS DRIVE
DUNEDIN FL 34698 US

Having been named as registered agent 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

Sue Gimeno
Required Signature/Registered Agent

October 17 2011
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Sue Gimeno
Required Signature/Incorporator

October 17 2011
Date

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