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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : CSH SERVICES, LLC
Account Number : I20070000160
Phone : (800) 494-3124
Fax Number : (561) 455-9885

****Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.**

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
LIF SERVICES INC.

Certificate of Status	0
Certified Copy	0
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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

LIF SERVICES INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6301 NW 5TH WAY, STE 5000
FORT LAUDERDALE, FLORIDA 33309

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1,500 COMMON SHARES PAR VALUE \$0.01

ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and officers is/are:

DIRECTOR, PRESIDENT
DAVID OWEN BOYCE
6301 NW 5TH WAY, STE 5000
FORT LAUDERDALE, FLORIDA 33309

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PAGE 2 LIF SERVICES INC.

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

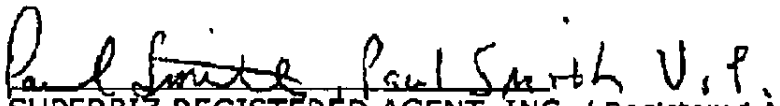
SUPERBIZ REGISTERED AGENT, INC.
2761 VISTA PARKWAY, STE E4
WEST PALM BEACH, FLORIDA 33411

ARTICLE VII INCORPORATOR

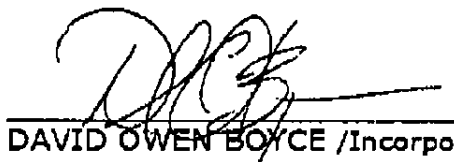
The name and Florida street address of the Incorporator is:

DAVID OWEN BOYCE
6301 NW 5TH WAY, STE 5000
FORT LAUDERDALE, FLORIDA 33309

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.



SUPERBIZ REGISTERED AGENT, INC. / Registered Agent 02/28/2012
Date



DAVID OWEN BOYCE /Incorporator

2/28/2012
Date

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