

APR/22/2014 10:08 AM  
4/22/2014

FAX No.

P 01/003

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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**FLORIDA PROFIT/NON PROFIT CORPORATION  
LIFE RESOURCES UNLIMITED GROUP, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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TALLAHASSEE, FLORIDA

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P. 002/003

**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: LIFE RESOURCES UNLIMITED GROUP, INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

8300 W FLAGLER ST

STE: 121-201

MIAMI, FL 33144

Mailing address, if different is:

8300 W FLAGLER ST

STE: 121-201

MIAMI, FL 33144

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL PURPOSE

**ARTICLE IV SHARES** 100

The number of shares of stock is: \_\_\_\_\_

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

Name and Title: (P) FERNANDO LOPEZ

Address: 8300 W FLAGLER ST

STE: 121-201

MIAMI, FL 33144

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

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(cont.)

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: FERNANDO LOPEZ  
Address: 8300 W FLAGLER ST STE: 121-201  
MIAMI, FL 33144

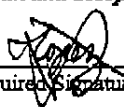
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**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: FERNANDO LOPEZ  
Address: 8300 W FLAGLER ST STE: 121-201  
MIAMI, FL 33144


*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*

  
\_\_\_\_\_  
Required Signature/Registered Agent

4/21/2014

\_\_\_\_\_  
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.*

  
\_\_\_\_\_  
Required Signature/Incorporator

4/21/2014

\_\_\_\_\_  
Date