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TRANSMITTAL LETTER

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 ESCHOLUS I 77 ESSECUES -03/07/96--01075--002 +****78.75

SUBJECT:

Health Max Life Systems, Inc.

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

\$78.75 to cover the cost of the Filing Fee & Certificate

FROM:

Donald A. Lamb 19816 - A Gulf Blvd. Indian Shores, FL 34635 (813)596-9500

ARTICLES OF INCORPORATION

MICANISSIE TORIOS The undersigned incorporator(s) for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE L NAME

The name of the corporation shall be:

Health Max Life Systems, Inc.

ARTICLE IL PRINCIPLE OFFICE

The principle place of business and mailing address of this corporation shall be:

19816 - A Gulf Blvd. Indian Shores, FL 34635

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

Ten Thousand Shares (10,000)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Donald A. Lamb 19816 - A Gulf Blvd. Indian Shores, FL 34635

ARTICLE V_INCORPORATOR(S)

The name(s) and address(es) of the incorporators of this corporation are:

Donald A. Lamb 19816 - A Gulf Blvd. Indian Shores, FL 34635

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this

57H day of MARCH, 1996.

(Signature)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

South College Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statements in designating the registered office/registered agent, in the State of Florida.

- ŧ. The name of the corporation is: Health Max Life Systems, Inc.
- 2. The name and address of the registered agent and office is:

Donald A. Lamb 19816 - A Gulf Blvd. Indian Shores, FL 34635

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this cerficate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314