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אין אווא אווא אווא אווא אווא אווא אווא	9, 1976
Florida Department of State Division of Corporations P.O. Box 6327	
Tullahassee, FL 32314	Structure 1 775 05 0305 St -047/9796 - 4008 3011 +444 122 ,50 - 4444 122 ,50
QUALITY LIFESTYLES	****122,50 ****122,50
Re: LIFESTYLES -2:000 (Name of Corporation)	SECOLI SE
Gentlemen:	Tu Philippings
Enclosed please find the original and one copy of the Articles of Incorcheck in the amount of \$122,50.	poration, together with my
This represents the cost of the Filing Fees, Certified Copy of Articles of Registered Agent Designation for the above named corporation.	of Incorporation and Fee for
Very truly yours.	
JEROM	E C. No tes TINE Individual's Name)
	ume of Corporation)
(1) I malenta abbita	ESS OF CORPORATION —
3962 M	AN O WAR CN.
	FL 32950

(407) <u>676-4070</u> Area Code Number

Ext.



May 2, 1996

JEROME C. NOTESTINE LIFESTYLES 2000, INC. 3962 MAN O WAR LN. VALKARIA, FL 32950

SUBJECT: LIFESTYLES 2000, INC. Ref. Number: W96000009376

QLIALITY LIFESTYLES, INC. We have received your document for LIFESTYLES-2000-INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Fiorida" or "Fiorida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000. - Callelin 5/8/96 - talled to Becky

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6924.

Sharon Tala Document Specialist Supervisor

Letter Number: 296A00021312

ARTICLES OF INCORPORATION

of

-1.+FE-5T-Y-LE-5-	2000	<u> </u>	QUALITY L	IFESTYLES, INC
(nam	e of corporation)	•	•
The undersigned acting as the incorporators of a corp the following articles of incorporation for such corporation		e Florida Bu	siness Corporation	ı Act, adopt(s)
ARTICLE I	- CORPORATE	NAME		
The name of the corporation is:				
HIFTSTYLES 2000,	TW C	QUALIT	Y LIFESTY	ILES, INC.
		•		4.4
ARTICI	LE II • DURATIO	ON'		96
This corporation shall exist perpetually unless dissolv	ed according to	Florida law.		1 VAN
ARTICI	LE III - PURPOS	SE		Copy State of the Copy State o
The corporation is organized for the purpose of engag United States and the State of Florida.	ing in any activ	ities or busin	ess permitted und	er the Law Eoffthe
The corporation is authorized to issue <u>500</u> sha ARTICLE V - INI The street address of the initial principal office and, if	TIAL PRINCIP	stock, par vi ML OFFICE		per share.
STREET ADDRESS				
3962 MAN O WAK LNI				
CITY VALKARIA-	FLORI	 ΟΛ	ZIP	32950
Mailing address, if different				
STREET ADDRESS				
CITY	FLORI	DA .	ZIP	
ARTICLE VI - INITIAL RE	GISTERED O.	FFICE ANI	O AGENT	
The street address of the initial registered office a	ind the name of	f the initial	registered agent	at the office is:
NAME JEROME C. NOTESTINE				
ADDRESS 3962 MAN O WAR LN.				
CITY VALKARIA	FLORIC)A	ZIP	32950

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have $\frac{-f\omega\partial}{}$ ($\frac{Z}{}$ either increased or diminished from time to time by the By-Laws	s, but shall never be less thr	
addresses of the initial director(s) of the corporation are as follow	ws:	
NAME JEROME C. NOTESTINE		
ADDRESS 3960. MAN O WAL LN		
CITY VALKACIA		ZIP 32450
NAME ROBERT G. MAHONEY		. 4
ADDRESS 785 CHATEAU ST. SE		
CITY PALM BAY	STATE FL	ZII 32909
NAME		
ADDRESS		
CITY	STALE	ZIP
ARTICLE VIII - IN	NCORPORATORS	
The names and addresses of the incorporators signing these Artic	eles of Incorporation are as	follows:
NAME JEROME C. NOTESTINE		
ADDRESS 3962- MAN O WAR W	7.	
CITY VALKARIA	STATE FL	ZIP 3:29.50
NAME ROBERT G. MAHONEY		
CITY PALM BAY	STATE FL	ZIP 32909
NAME		
ADDRESS		
CITY	STATE	ZiP
The undersigned incorporator(s) have executed these Articl	les of Incorporation this	24 th
A	19 <u>96</u> .	
		4
	Jume C. Note	The (Signature)
	June 14	(Signature)
		(Signature)
		(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENTY REGISTERED OFFICE

	11 124
•	
QUALITY LIFESTYLES, INC. LIFESTYLES 2000, INC. (name of corporation)	<u>111</u>
LHESTYLES ZOOD, TUC.	5.3
(name of corporation)	
Parsuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:	
The above corporation, organized under the laws of the State of Florida with its registered	office
as indicated in the Articles of Incorporation	
III 3965 MAN O WAR LN.	
VALKARIA, FL 32950	
NALKARIA, FL 32950 has named JEROME C. NOTESTINE	
located at the aforesaid address, as its registered agent to accept service of process within	tl·ie
state.	
Sinc,	
Having been named as registered agent and to accept service of process for the above state	
corporation at the place designated in this certificate, I hereby accept the appointment as re	egis-
tered agent and agree to act in this capacity. I further agree to comply with the provisions of	of all
statutes relating to the proper and complete performance of my duties, and I am familiar vy	ith
and accept the obligations of my position as registered agent.	
Signature) APRIL 24, 1996	
(Signature) (Date)	