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TRANSMITTAL LETTER

FILED

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

98 FEB 13 PM 3:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-02/13/98--01037--006
****122.50 ****122.50

SUBJECT: LMJ Wellness, Inc.,
(Proposed corporate name - must include suffix)

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

<input type="checkbox"/> \$70.00 Filing Fee	<input type="checkbox"/> \$78.75 Filing Fee & Certificate	<input checked="" type="checkbox"/> \$122.50 Filing Fee & Certified Copy	<input type="checkbox"/> \$131.25 Filing Fee, Certified Copy & Certificate
ADDITIONAL COPY REQUIRED			

FROM: Lawrence Taube, Esq.
Name (Printed or typed)

1818 So. Australian Ave., #400
Address

West Palm Beach, FL 33409
City, State & Zip

(561) 697-9670
Daytime Telephone number

Laurel
Lawrence Taube
GAVE
AUTHORIZATION BY PHONE TO
CORRECT corp name
DATE 3/1
DOC. EXAM. 3/1

NOTE: Please provide the original and one copy of the articles.

FEB 17 1998

LAW OFFICES
LAWRENCE U. TAUBE
1818 SOUTH AUSTRALIAN AVENUE
SUITE 400
WEST PALM BEACH, FLORIDA 33409
TELEPHONE (561) 697-9670
FACSIMILE (561) 697-3686

February 4, 1998

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: LMJ Wellness, Inc.

Dear Sir/Madame:

Enclosed please find an application for incorporation as well as the appropriate fee and return envelope.

Please feel free to contact me.

Law Office of Lawrence U. Taube



Laurie Jo Schultheis
Legal Sect.
/s/
Enc.

ARTICLES OF INCORPORATION

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.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

LMJ Wellness, Inc.

ARTICLE II PRINCIPAL OFFICE

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

9240 Lake Serena Drive, Boca Raton, FL 33496

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
2,000 shares of common stock, par value \$.01 per share

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Lorraine Newman, 9240 Lake Serena Drive, Boca Raton, FL 33496

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

1. Michael Motel, 9240 Lake Serena Drive, Boca Raton, FL 33496; Pres.
2. Jay Newman, 9240 Lake Serena Drive, Boca Raton, FL 33496; VP

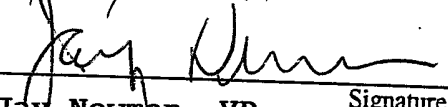
The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

10 day of February, 1998.

(An additional article must be added if an effective date is requested.)



Michael Motel, PresSignature



Jay Newman, VP Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

98 FEB 13 PM 3:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 STATEMENT IN DESIGNATING THE REGISTERED
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is LMJ Wellness, Inc.

2. The name and address of the registered agent and office is:

Lorraine Newman

(NAME)

9240 Lake Serena Drive

(P. O. Box or Mail Drop Box NOT ACCEPTABLE)

Boca Raton, FL 33496

(CITY/STATE/ZIP)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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.



(SIGNATURE)

2-10-98

(DATE)