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TRANSMITTAL LETTER

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

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SUBJECT: <u>Genesis Life Management, Inc.</u> (Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check made payable to the Department of State in the amount of \$96.25 for

\$ 70.00	(filing fee)
17.50	(two certified copies)
8.75	(Certificate of Status)
<u>\$ 96.25</u>	Total

FROM: _____Fernando Deheza

Name (Printed or typed)

<u>371 N.W. 103rd Terrace</u> Address

Pembroke Pines, Florida 33026 City, State & Zip

(305) 655-3680 Daytime telephone number

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

1.5

The name of the corporation shall be GENESIS LIFE MANAGEMENT, I

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be 371 N.W. 103rd Terrace, Pembroke Pines, Florida 33026.

<u>ARTICLE III SHARES</u>

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 500.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are Maria Z. Deheza, 371 N.W. 103rd Terrace, Pembroke Pines, Florida 33026.

ARTICLE V INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation are Meryl S. Gold-Levy, 4229 S.W. 13th Street, Miami, Florida 33134.

Signature of Incorporator MERYL S. GOLD-LEVY

Date

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.

lleleza 3/19/99

Signature of Registered Agent