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TRANSMITTAL LETTER

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

500002826135--7  
-04/01/99--01044--015  
\*\*\*\*\*96.25 \*\*\*\*\*96.25

SUBJECT: Genesis Life Management, Inc.  
(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)  
\$ 96.25 Total

FROM: Fernando Deheza  
Name (Printed or typed)  
371 N.W. 103rd Terrace  
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.

RECEIVED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

99 APR - 1 AM 9:54

FILED

CB  
4/1/99  
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**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**

The name of the corporation shall be **GENESIS LIFE MANAGEMENT, INC.**

**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.**

**ARTICLE III SHARES**

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**

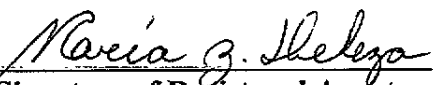
The name and Florida street address of the initial registered agent are **Maria Z. Deheza, 371 N.W. 103rd Terrace, Pembroke Pines, Florida 33026.**

**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.**

      3/19/99  
Signature of Incorporator      Date  
MERYL S. GOLD-LEVY

*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.*

      3/19/99  
Signature of Registered Agent      Date

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99 APR - 1 PM 9:54  
STATE OF FLORIDA  
COUNTY OF PEMBROKE PINES