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August 20, 2010

Department of State, Florida
Clifton Building
2611 Executive Center Circle
Tallahassee FL 32301

Re: Order #: 7917455 SO
Customer Reference 1: Fox Geriatric
Customer Reference 2: *

Dear Department of State, Florida:

Please obtain the following:

Fox Geriatric Education and Research Institute, Inc. (NJ)
Qualification
Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Connie R Bryan
Senior Fulfillment Specialist
Connie.Bryan@wolterskluwer.com

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Fox Geriatric Education and Research Institute, Inc.
(Name of Corporation – must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Suzanne M. Irwin, Paralegal

(Name of Person)

c/o Flaster/Greenberg

(Firm/Company)

1810 Chapel Ave

(Address)

Cherry Hill NJ 08002

(City/State and Zip Code)

For further information concerning this matter, please call:

Suzanne M. Irwin, Paralegal

(Name of Person)

at (856) 382-2251

(Area Code & Daytime Telephone Number)

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

\$70.00 Filing Fee

\$78.75 Filing Fee &
Certificate of Status

\$78.75 Filing Fee &
Certified Copy

\$87.50 Filing Fee,
Certificate of Status &
Certified Copy

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. Fox Geriatric Education and Research Institute, Inc.
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

2. New Jersey 3. 26-1102244
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 9/19/07 5. perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. _____
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 7 Carnegie Blvd., Cherry Hill, NJ 08002
(Principal office address)

7 Carnegie Blvd., Cherry Hill, NJ 08002
(Current mailing address)

8. See attachment
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: C T Corporation System

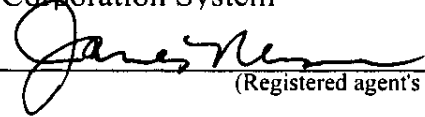
Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(City) (Zip Code)

10. **Registered agent's acceptance:**
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

C T Corporation System

JAMES M. NEWSOME
Special Assistant Secretary

By: 
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: See attachment

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: _____

Address: _____

Vice President: _____

Address: _____

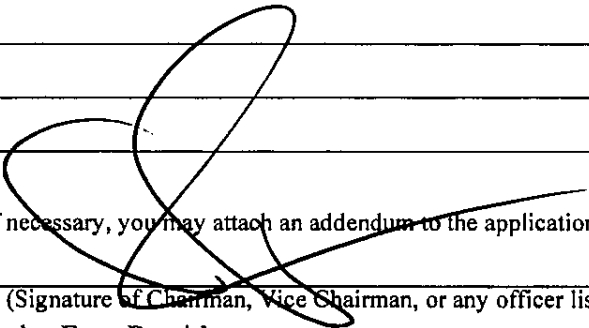
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.  _____
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Timothy Fox, President
(Typed or printed name and capacity of person signing application)

NAMES OF OFFICERS AND TRUSTEES OF THE CORPORATION

Timothy Fox, President and Trustee
1354 Hainesport Road
Mt. Laurel, NJ 08054

Richard Austin Duus, Treasurer
132 Pearl Croft Road
Cherry Hill, NJ 08034

Paul Della Vecchia, Jr., Vice-President and Trustee
4 Crofton Chase
Marlton, NJ 08053

Carolyn Risilia, Senior Vice-President and Trustee
222 Oakford Avenue
Delanco, NJ 08075

Marcus Besser, PhD, Secretary and Trustee
11 Maryland Ave
Havertown, PA 19083

Michelle (Mimi) Jacobs, Executive Director
5 Birchwood Drive
Medford, NJ 08055

Purpose of corporation

The purpose of Fox Geriatric Education and Research Institute, Inc. is to provide educational programs including seminars for public and continuing education programs for medical professionals and existing clinical research.

**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
SHORT FORM STANDING**

FOX GERIATRIC EDUCATION AND RESEARCH INSTITUTE, INC.

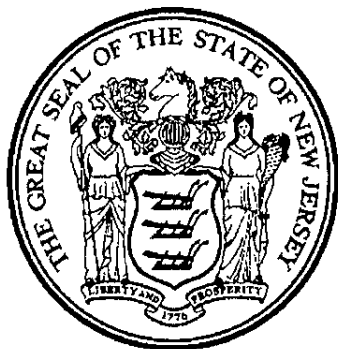
0100984482

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Non Profit Corporation was registered by this office on September 19, 2007.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

*Flaster, Greenberg, Et Al
1810 Chapel Ave West
3rd Fl
Cherry Hill, NJ 08002*



Certification# 117941791

*IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed my
Official Seal at Trenton, this
19th day of August, 2010*

*Andrew P Sidamon-Eristoff
State Treasurer*

Verify this certificate at
https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp