

P0200004874C

TRANSMITTAL LETTER

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

000005368870--1  
-04/29/02--01070--023  
\*\*\*\*128.75 \*\*\*\*128.75

SUBJECT: \_\_\_\_\_

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

FEES:

Certificate of Domestication	\$50.00
Articles of Incorporation and Certified Copy	\$78.75
Total to domesticate and file	\$128.75

FILED  
02 APR 29 AM 10:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

OPTIONAL:

Certificate of Status	\$ 8.75
-----------------------	---------

FROM: Shifrin Alex H. Inc. - N. IRE., Incorporated c/o Steven Miles Shifrin  
Name (Printed or typed)

777 East Atlantic Ave #128  
Address

Delray Beach, FL 33483  
City, State & Zip

(561) 376-7840  
Daytime Telephone number

Document # F98000004971

AC/3

## CERTIFICATE OF DOMESTICATION

The undersigned, STEVEN MILES SHIFRIN, President,  
(Name) (Title)

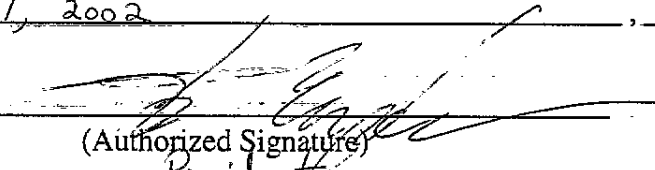
of SHIFRIN HEALTHCARE-N. IRE., INCORPORATED a foreign Corporation,  
(Corporation Name)  
in accordance with F.S., 607.1801 does hereby certify:

FILED  
02 APR 29 AM 10:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The date on which corporation was first formed was 5-3-1995
2. The jurisdiction where the above named corporations was first formed, incorporated or otherwise came into being was New Jersey
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was SAME AS ABOVE
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 607.0202 and 607.0401 with this certificate is SAME AS ABOVE
5. The jurisdiction that constituted the seat, siege, social principal place of business or central administration of the corporation, or any other equivalent thereto under applicable law immediately prior to the filing of the Certificate of Domestication was FLORIDA
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am President, of SHIFRIN HEALTHCARE-N. IRE., INCORPORATED

and am authorized to sign this certificate of Domestication on behalf of the corporation and have done so this the 5<sup>TH</sup> day of April, 2002

  
(Authorized Signature)

### Filing Fee:

Certificate of Domestication	\$50.00
Articles of Incorporation and Certified Copy	\$78.75
Total to domesticate and file	\$128.75

**ARTICLES OF INCORPORATION**

In compliance with Chapter F.S., 607.

**ARTICLE I NAME**

The name of the corporation shall be:

SHIFRIN HEALTHCARE-N.IRE., INCORPORATED

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

777 East Atlantic Ave #178

Delray Beach, FL 33483

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Business: student Recruitment/Placement Services

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s) and address(es):

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and Florida street address of the registered agent is:

Shifrin Healthcare-N.IRE., INC.

c/o Steven Miller Shifrin

777 East Atlantic Ave #178

Delray Beach, FL 33483

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Steven Miller Shifrin, President

777 East Atlantic Ave #178

Delray Beach, FL 33483

\*\*\*\*\*  
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 am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Signature/Registered Agent

President

Date

4-5-02

Signature/Incorporator

President

Date

4-5-02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02 APR 29 AM 10:54

FILED