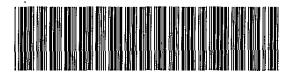
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(Re	equestor's Name)			
(Address)				
	ddress)			
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(D)	ocument Number)			
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
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Office Use Only



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7. Styles Mile 0 5 July

TRANSMITTAL LETTER

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

SUBJECT:	Certificate of Domestication		
Enclosed is an	original and one (1) copy of the Certificat	te of Domesticati	ion and a check for
FEES:			
Article	cate of Domestication s of Incorporation and Certified Copy o domesticate and file	\$50.00 <u>\$78.75</u> \$128.75	
OPTIONAL:			
Certific	cate of Status	\$ 8.75	ASBIN OF COM
FROM	Klaus P. Hilgers		0 70
	Name (printed or	r typed)	**************************************
	1221 Rogers Street, Suite A		
	Address		
	Clearwater, FL 33756		
	City, State &	Zip	
	727-447-1773		
	Daytime Telephone	Number	

CERTIFICATE OF DOMESTICATION

The undersigned.	Klau s P. Hilgers	President
	(Name)	(Title)
	Consultants, Inc. (Corporation Name) h s. 607.1801, Florida Statutes, does he	a foreign corporation reby certify:
	hich corporation was first formed was	
-	on where the above named corporation ving wasNew Jersey	was first formed, incorporated, or otherw
	he corporation immediately prior to the Consultants, Incorporated	filing of this Certificate of Domestication
4. The name of t	he corporation, as set forth in its articles	s of incorporation, to be filed pursuant to
s. 607.0202 aı	nd 607.0401 with this certificate is	
Epoc	ch Consultants, Inc.	
administration	on that constituted the seat, siege social, of the corporation, or any other equivace of the Certificate of Doi Scotch Plains, New Jersey	
6. Attached are I to s. 607.1801	Florida articles of incorporation to comp	plete the domestication requirements pur
I am President	, ofEpoch Consultants I	*** C =
and am authorized	to sign this Certificate of Domestication	on on behalf of the corporation and have
so this the 29th		, ² 2005
	Klaus P. Hu. (Authorized Sign	lgees
	(Authorized Sign	ature)

Filing Fee:

Certificate of Domestication
Articles of Incorporation and Certified Copy
Total to domesticate and file

\$50.00 <u>\$78.75</u> \$128.75

ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

NAME

THE NAME OF THE CORPORATION SHALL BE:

Epoch Consultants, Inc.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:

1221 Rogers Street, Suite A

Clearwater, FL 33756

ARTICLE III **PURPOSE**

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

Any and all legal business

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS:

2500

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

Klaus P. Hilgers

President

1500 Maple Street, Clearwater, FL 33755

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

Klaus P. Hilgers

1500 Maple Street, Clearwater, FL 33755

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

Klaus P. Hilgers

1500 Maple Street, Clearwater, FL 33755

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

Signature/Incorporator