

P/3000021754

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

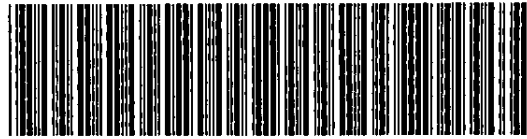
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Spoke w/ L.d.a from Fast Kit.
this is a domestication
3/11/13

Office Use Only



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03/07/13--01018--010 **128.75

FILED
13 MAR -8 PM12:32
SECRETARY OF STATE
TALLAHASSEE FLORIDA

VH

FASTKIL CORP

Requester's Name

11250 NW 25 ST SUITE 100

Address

MIAMI, FL 33172

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. HEALTH RELIEF JOBS, COM INC
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☒ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials

CERTIFICATE OF DOMESTICATION

FILED

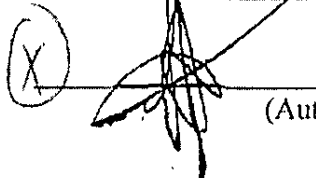
The undersigned, FARHAD AMIRKHANI, MGRM 13 MAR -8 PM 12:32
(Name) (Title)
of HEALTH RELIEF JOBS. COM INC. SECRETARY OF STATE
TALLAHASSEE, FLORIDA
a foreign corporation
(Corporation Name)

in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was JUNE 20, 2005.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was STATE OF DELAWARE.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was HEALTH RELIEF JOBS.COM INC.
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 HEALTH RELIEF JOBS.COM INC.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was STATE OF DELAWARE.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am MANAGING MEMBER, of HEALTH RELIEF JOBS.COM INC.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 25TH day of FEBRUARY, 2012



 (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 607, F.S.

FILED

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

HEALTH RELIEF JOBS.COM INC.

13 MAR -8 PM 12: 32

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address

Mailing Address

8740 NE 2ND AVENUE

8740 NE 2ND AVENUE

EL PORTAL, FL 33138

EL PORTAL, FL 33138

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

THIS CORPORATION MAY ENGAGE IN OR TRANSACT ANY OR ALL LAWFUL ACTIVITIES

OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES, THE STATE OF FLORIDA,

OR ANY OTHER STATE, COUNTY, TERRITORY, OR NATION.

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 1000

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

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

Title/Name

DIRECTOR - FARHAD AMIRKHANI

Title/Name

8740 NE 2nd AVE
EL PORTAL, FL 33138

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

FARHAD AMIRKHANI
8740 N.E. 2ND AVENUE
EL PORTAL, FL 33138

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

FARHAD AMIRKHANI
8740 N.E. 2ND AVENUE
EL PORTAL, FL 33138

**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.**

(X) [Signature]
Signature/Registered Agent

(X) 2/28/13
Date

(X) [Signature]
Signature/Incorporator

(X) 2/28/13
Date