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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

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

SUBJECT: RELATIONAL CONCEPTS, INC.

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

OPTIONAL:

Certificate of Status

\$ 8.75

Relational Concepts, Inc.

Name (printed or typed)

1849 S Ocean Drive Apt PH14

Address

Hallandale, Fl 33009

City, State & Zip

917-751-0947

Daytime Telephone Number

fredk@relational-concepts.com

E-mail address: (to be used for future annual report notification)

CERTIFICATE OF DOMESTICATION

FILED

The undersigned, Fred Khodorov	President	2016 SEP -6 AM 9: 22
(Name) of Relational Concepts, Inc.		(Title): TALLAHASSEL, FLORIDA Toreign corporation,
(Corporation Name) in accordance with s. 607.1801, Florida Statutes, does here	by certify:	_a& foreign corporation,
1. The date on which corporation was first formed was Ju	une 12	<u> </u>
The jurisdiction where the above named corporation was came into being was New Jersey	as first formed, inc	_
The name of the corporation immediately prior to the fi was Relational Concepts, Inc.	ling of this Certifi	cate of Domestication
4. The name of the corporation, as set forth in its articles of s. 607.0202 and 607.0401 with this certificate is Relat	of incorporation, to	<u>-</u>
5. The jurisdiction that constituted the seat, siege social, or administration of the corporation, or any other equivalent immediately before the filing of the Certificate of Dome New Jersey	nt jurisdiction und	
 Attached are Florida articles of incorporation to comple to s. 607.1801. 	te the domestication	on requirements pursuant
President of Relational Concepts, Ir	nc.	
and am authorized to sign this Certificate of Domestication so this the 23 day of AUGUST (Authorized Signature)		orporation and have done, 2016
Filing Fee: Certificate of Domestication Articles of Incorporation and Certifie Total to domesticate and file	d Copy <u>\$ '</u>	50.00 <u>78.75</u> 28.75

ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

FILED

22

SEF. FLORIDA
LONIDA
PH14

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ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:			
Title/Name	Title/Name		
Fred Khodorov PRES	ELIZABETH MEDRISH VP		
1849 S Ocean Dr Apt PH14	1849 S Ocean Dr Apt PH14		
Hallandale, Fl 33009	Hallandale, FI 33009		
Title/Name	Title/Name		
Title/Name	Title/Name		
Title/Name	Title/Name		

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 100

INITIAL REGISTERED AGENT AND STREET ADDRESS THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS: Fred Khodorov 1849 S Ocean Dr Apt PH14 Hallandale, Fl 33009 ARTICLE VII **INCORPORATOR** THE NAME AND ADDRESS OF THE INCORPORATOR IS: Fred Khodorov 1849 S Ocean Dr Apt PH14 Hallandale, FI 33009 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. 8/22/2016 Date Signature/Registered Agent 8/22/2016 Signature/Incorporator