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Florida Department of State  
Division of Corporations  
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Division of Corporations  
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FLORIDA PROFIT/NON PROFIT CORPORATION  
NEXNOVA CORP

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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TALLAHASSEE, FLORIDA  
18 FEB - 1 PM 3: 23

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2018 FEB - 2 PM 3: 23

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 (Profit)

**ARTICLE I NAME:** The name of the corporation is:

NEXNOVA CORP

**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

3105 NW 107TH AVE SUITE 400 C-1

DORAL FL 33172

**ARTICLE III SHARES:** The number of shares of stock is: 100

**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

PRESIDENT- KARINA ALEJANDRA MONTEIRO RAMOS

3105 NW 107TH AVE SUITE 400 C-1

DORAL FL 33172

SECRETARY- WALDO CANALS

3105 NW 107TH AVE SUITE 400 C-1

DORAL FL 33172

18 FEB - 1 PM 3:25  
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TALLAHASSEE FLORIDA

**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

KARINA ALEJANDRA MONTEIRO RAMOS

3105 NW 107TH AVE SUITE 400 C-1

DORAL FL 33172

**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:

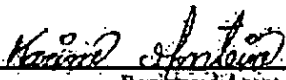
KARINA ALEJANDRA MONTEIRO RAMOS

3105 NW 107TH AVE SUITE 400 C-1

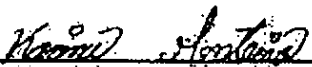
DORAL FL 33172

**Required Signatures:**

Having been named as registered agent 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

 _____ Registered Agent	_____ Date
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I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in 8.817.155, F.S.

 _____ Incorporator	_____ Date
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 18 FEB -1 PM 3: 26  
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