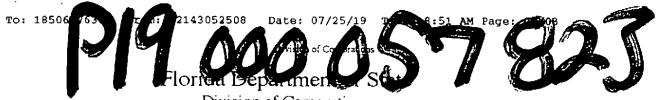
7/24/2019



Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6381

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Account Number : 120180000011 Phone : (844)386-0178 Fax Number : (214)317-4754

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

8ma 11	Address:	

FLORIDA PROFIT/NON PROFIT CORPORATION TEAMNOVO, INC.

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To: 18506176381 From: 12143052508 Date: 07/25/19 Time: 8:51 AM Page: 02/03

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE II PRIN	CIPAL OFFICE Principal <u>street</u> address	Mailing address, if different is: 169 East Flagler Street, Suite 1428 Miami, FL 33131	
169 East Flagler Street	Suite 1428		
Miauú, FL 33131			
ARTICLE III PURP The purpose for which	OSE he corporation is organized is:	ul Purpose	
ARTICLE IV SHAR The number of shares of	ALOFFICERS AND/OR DIRECTORS AUGUSTINE NOVO DIRECTOR	,	19 JUL 25 PH IN
			_
Name and Title Address			

To: 18506176381 From: 12143052508 Date: 07/25/19 Time: 8:51 AM Page: 03/03

(((H19000222880 3)))

Name a	nd Title	Name and Title:		
Address		Address:		
	REGISTERED AGENT	No fish a market and the contribution		
Inc name and	Florida street address (P.O. Box NOT acceptable DOMINIQUE LEROY) of the registered agent is.		
Name:		_	19 [Al	
Address:	169 East Flagler Street, Suite 1428			
	Miami, FL 33131		550 N	
			5 PH D	
ARTICLE VII	<u>INCORPORATOR</u>			
The name and	address of the Incorporator is:		<u> </u>	
Name.	DOMINIQUE LEROY		F - 79	
Address:	169 East Flagler Street, Suite 1428		¥,,,3	
	Miami, FL 33131			
Effective date,	EFFECTIVE DATE: if other than the date of filing: date is listed, the date must be specific and car	. (OPTIONA anot be more than five days	L) prior or 90 days after the	
the document's Having been no	te inserted in this block does not meet the applical effective date on the Department of State's record named as registered agent to accept service of proclamation with and accept the appointment as	is. cess for the above stated corn	Oration at the place designated in	
			7/23/19	
- A	Required Signature Registered Agent		Date	
I secomit this do document to the	ocument and officen that the facts stated herein as Department of State constitutes of third degree fe	re true. I am aware that the lony as provided for in s.817.	false information submitted in a 155, F.S.	
16	man day		7/23/19	
Requ	uired Signature Theorperator	· · · · · · · · · · · · · · · · · · ·	Date	