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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : INCORP SERVICES INC
Account Number : I20120000007
Phone : (702) 866-2500
Fax Number : (702) 866-2689

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

Email Address:

Managedreports@incorp.com

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 OCT 22 P 12:08

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FOREIGN PROFIT/NONPROFIT CORPORATION

Novati Technologies, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

OCT 23 2015
J. BRUCE

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Novati Technologies, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Melissa Gubler

Name of Person	FILED 2015 OCT 22 P 2:08 SECRETARY OF STATE TALLAHASSEE, FLORIDA
InCorp Services, Inc.	
Firm/Company	
2360 Corporate Circle, Suite 400	
Address	
Henderson, NV 89074	
City/State and Zip code	
managedreports@incorp.com	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

Melissa Gubler on behalf of InCorp Services, Inc. at (702) 866-2500

Name of Person	Area Code	Daytime Telephone Number
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STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee
 ☐ \$78.75 Filing Fee & Certificate of Status
 ☐ \$78.75 Filing Fee & Certified Copy
 ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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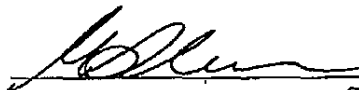
**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Novati Technologies, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Texas 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 10/10/2012 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)
6. Upon Filing
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 2706 Montopolis Drive, Austin, TX 78741
(Principal office address)
- _____ (Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: InCorp Services, Inc.
- Office Address: 17888 67th Court North
- Loxahatchee, Florida 33470
(City) (Zip code)

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



_____ Melissa Gubler on behalf of InCorp Services, Inc.

(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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TALLAHASSEE, FLORIDA

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11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: David B. Anderson

Address: 2706 Montopolis Drive

Austin, TX 78741

Director: _____

Address: _____

B. OFFICERS

President: David B. Anderson

Address: 2706 Montopolis Drive

Austin, TX 78741

Vice President: _____

Address: _____

Secretary: David B. Anderson

Address: 2706 Montopolis Drive, Austin, TX 78741

Treasurer: David B. Anderson

Address: 2706 Montopolis Drive, Austin, TX 78741

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. ☒  _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. David B. Anderson, President

(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697

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Carlos H. Cascos
Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Novati Technologies, Inc. (file number 801667628), a Domestic For-Profit Corporation, was filed in this office on October 10, 2012.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on August 28, 2015.



C. H. Cascos

Carlos H. Cascos
Secretary of State

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