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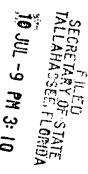
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Special Instructions to Filing Officer:				
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: NovoNova, In	nc	·
DOCUMENT NUMBER: N10000002158	ı	
The enclosed Articles of Amendment and fee are su	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Max	xo Mesadieu	
(Name o	of Contact Person)	
(Firm	m/ Company)	
	(Address)	
(City/ Sta	ate and Zip Code)	
mesadim@jn	mcinsuranceone.com	
E-mail address: (to be use	ed for future annual report notification)	
For further information concerning this matter, pleas	se call:	
Maxo Mesadieu	at (954) 773-1077	
(Name of Contact Person)	(Area Code & Daytime Telephone Nu	mber)
Enclosed is a check for the following amount made	payable to the Florida Department of State:	
✓ \$35 Filing Fee	□\$43.75 Filing Fee & □\$52.50 Fil Certified Copy Certificate of (Additional copy is enclosed) (Additional Copy is enclosed) □\$52.50 Fil Certified Copy (Additional Copy is enclosed)	Status by Copy
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, El. 32314	Street Address Amendment Section Division of Corporations Clifton Building	

Tallahassee, FL 32301

Articles of Amendment

to

Artic	les of Incorpo	ration	4		
	$\bigcup_{\mathbf{o}_{\mathbf{f}}} \bigvee_{\mathbf{f}} \bigcup_{\mathbf{f}}$	nova	$\frac{1}{r}$	X	
(Name of Corporation as curre	ntly filed with	he Florida Dept. of	State		
N100	000002158				
(Document Num	ber of Corporati	on (if known)			
Pursuant to the provisions of section 617.1006, I the following amendment(s) to its Articles of Inc.	Florida Statutes, corporation:	this <i>Florida Not Fo</i>	r Profit Corpora	<i>ition</i> adopt	is.
A. If amending name, enter the new name of	the corporation	<u>1:</u>	•		
	N/A	٠			
The new name must be distinguishable and co abbreviation "Corp." or "Inc." <u>"Company" or</u>	ntain the word "Co." may not	"corporation" or " be used in the name	incorporated" o	r the	
B. Enter new principal office address, if appl	icable:				
(Principal office address <u>MUST BE A STREE</u>)	(ADDRESS)	•			
		,			TA S
					ECR.
C. Enter new mailing address, if applicable:				1	HAS ETA
(Mailing address <u>MAY BE A POST OFFIC</u>	<u>E BOX</u>)			9	33.75 (1) (1)
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D. If amending the registered agent and/or renew registered agent and/or the new registered.			enter the name	of the	
	orea orree aga	10331			
Name of New Registered Agent:					
Now Books and Office (Library	/rii .				
New Registered Office Address:	(Fioria	da street address)			
-		(Cit.)	, Florida		
		(City)	(Zip Cod	<i>ie)</i>	
New Registered Agent's Signature, if changing hereby accept the appointment as registered position.			cept the obligat	ions of the	e
Sic	anature of New	Registered Agent if	hanaina		

remove	ed and t	itle, name, and address nal sheets, if necessary)				
<u>Title</u>		Name		Address		Type of Action
,	~		•			_ □ Add _ □ Remove
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····	-					_ □ Add _ □ Remove
	ch addit	g or adding additional A ional sheets, if necessary, organization is organi). (Be specifi	c)	le religioùs e	educational and
		poses, including, for				
		s exempt organization				
	<u></u>	responding section o			·	arrevenue
				· ''		for one or more
	·	the dissolution of the		·	· · · · · · · · · · · · · · · · · · ·	<u>_</u>
		oses within the mean			,	 -
	· .	ding section of any fu				
goverr	nment,	or to a state or local	government,	for a public pu	irpose. Any su	uch assets not
dispos	ed or s	shall be disposed of b	y a Court of	Competent Ju	risdiction of th	e county in whic
he pri	ncipal	office of the organiza	tion is then le	ocated, exclus	ively for such	purposes or to
such c	organiz	ation or organization	s, as said Co	urt shall deterr	mine which ar	e organized and
opera	ted exc	clusively for such pur	ooses.			
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Novonova, Inc. 80-0565550

Additional Information Requested:

1. Please read the Penalties of Perjury statement on page 1 above.
Then, please sign and date below, indicating you agree to the Declaration.

Date

- 2. Enclosed is a copy of your Articles of Incorporation that was secured from the website of the State of Florida. We have made it part of your file. Since we have provided a copy of this information to you, it is available for public inspection as part of your exemption application.
- 3. In order to meet the organizational test for exemption under section 501(c)(3), your Articles of Incorporation must be amended with the State of Florida to include the following provisions:
 - a. Said organization is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.
 - b. Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not disposed of shall be disposed of by a Court of Competent Jurisdiction of the county in which the principal office of the organization is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

PLEASE SUBMIT A COMPLETE COPY OF THIS AMENDMENT. SINCE YOU ARE INCORPORATED IN THE STATE OF FLORIDA, THE COPY THAT YOU SUBMIT TO US MUST SHOW THAT IT HAS BEEN PROPERLY FILED AND APPROVED BY YOUR APPROPRIATE STATE AGENCY. WE CANNOT ACCEPT A COPY STAMPED "RECEIVED".

4. On the enclosed dopy of page 11 of your Form 1023, you did not indicate the public charity foundation status that your organisation would like to request. Based on your sources of support, you appear to be best described as a publicly supported organization under sections 509(a)(1) and 170(b)(1)(A)(vi).

The date of each amendment(s)	adoption: 07/06/2010	
	(date of adoption is r	equired)
Effective date <u>if applicable</u> :		
	(no more than 90 days after ame	endment file date)
Adoption of Amendment(s)	(CHECK ONE)	,
The amendment(s) was/were a was/were sufficient for approve	dopted by the members and the numberal.	er of votes cast for the amendment(s)
There are no members or men adopted by the board of direct	nbers entitled to vote on the amendmer ors.	nt(s). The amendment(s) was/were
. Dated <i>07/0</i>	106/8010	·
Signature	herrical .	:
(By the have n		rd, president or other officer-if directors if in the hands of a receiver, trustee, o ary)
_	MAX o Mc Sadied	; <u>/</u>
<i>A</i>	(Typed or printed name of p	person signing)
*	(Title of person eignir	ng)

Page 3 of 3