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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE : 326688 AUTHORIZATION : COST LIMIT: \$ 70.00 ORDER DATE: June 16, 2020 ORDER TIME : 12:07 PM ORDER NO. : 326688-001 CUSTOMER NO: 8311555 DOMESTIC FILING NAME: MTECNOVA.COM INC EFFECTIVE DATE: XX ARTICLES OF INCORPORATION _____ CERTIFICATE OF LIMITED PARTNERSHIP

____ ARTICLES OF ORGANIZATION

CERTIFIED COPY
XX PLAIN STAMPED COPY

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson - EXT. 62980 EXAMINER'S INITIALS:

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I The name of the	NAME the corporation shall be:	OM INC	
	PRINCIPAL OFFICE		
954	Principal <u>street</u> address: 4 Abby Glen Circle	Mailing address, if differ	ent is:
Jack	ksonville, FL 32257		
ARTICLE III The purpose f	FURPOSE for which the corporation is organized is the Veteran community. Identifying to	Provide talent development and management s various skill gaps within various organizations have	ervices within ve and help them in
fulfilling thes	se gaps with available talent pool. Pr	oviding job specific trainings to the candidates to	improve their
employ-abili	ity. Hiring candidates directly and pla	cing them into various organizations as contract	employees and/or
consultants.	. Identify and provide solutions within	the Medical Technology industry including produ	icts and services.
Provide con	sulting solutions to other companies	servicing various industries including Medical de	vices and Life
		all business streams including but not limited to l	Engineering,
Manageme	nt, Logistics, Supply Chain, Marketing MANNER OF ELECTION The management	g and Sales roles. canner in which the directors are elected and appointed:	
ANNU			
ARTICLE V	INITIAL OFFICERS AND/OR DIR	ECTORS	
·	Gaurav Shokeen, Director	Name and Title:	
Address	9544 Abby Glen Circle	Address:	
Addiess	Jacksonville, FL 32257		222 Anii
Name and Tit	le:	Name and Title:	
Address		Address:	
Aumcas			
			02
Name and Tit	le:	Name and Title:	
Address		Address:	

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Name and Title	<u> </u>	Name and Title:	
Address		Address:	
			
			
Name and Title	;	Name and Title:	
Address		Address:	
			-
ARTICLE VI	REGISTERED AGENT Florida street address (P.O. Box NOT	Succeptable) of the registered agent	is:
Name:	Raj Roperia		
Address:	5519 Cypress Hill Road		
			
	Winter Garden, FL 34787		
ARTICLE VII The name and	INCORPORATOR		
ARTICLE VII The name and Name:			
The name and	INCORPORATOR address of the Incorporator is:		
The <u>name and</u> Name:	INCORPORATOR address of the Incorporator is: Gaurav Shokeen		
The name and Name: Address:	INCORPORATOR address of the Incorporator is: Gaurav Shokeen 9544 Abby Glen Circle Jacksonville, FL 32257	(OPT)	ONA()
The name and Name: Address: ARTICLE VIII Effective date,	INCORPORATOR address of the Incorporator is: Gaurav Shokeen 9544 Abby Glen Circle Jacksonville, FL 32257 I EFFECTIVE DATE: if other than the date of filing:		ONAL) days prior or 90 days after the filing
The name and Name: Address: ARTICLE VIII Effective date, (If an effective Note: If the da	INCORPORATOR address of the Incorporator is: Gaurav Shokeen 9544 Abby Glen Circle Jacksonville, FL 32257 I EFFECTIVE DATE: if other than the date of filing: date is listed, the date must be spec-	ific and cannot be more than five the applicable statutory filing requ	ONAL) days prior or 90 days after the filing irements, this date will not be listed as
Name: Address: ARTICLE VIII Effective date, i (If an effective Note: If the da document's effet Having been no	INCORPORATOR address of the Incorporator is: Gaurav Shokeen 9544 Abby Glen Circle Jacksonville, FL 32257 I EFFECTIVE DATE: if other than the date of filing: date is listed, the date must be spector in this block does not meet ective date on the Department of State amed as registered agent to accept see familiar with and accept the appointment.	ific and cannot be more than five the applicable statutory filing requ 's records. rvice of process for the above stat	days prior or 90 days after the filing irements, this date will not be listed as ed corporation at the place designate.
Name: Address: ARTICLE VIII Effective date, i (If an effective Note: If the da document's effet Having been no	INCORPORATOR address of the Incorporator is: Gaurav Shokeen 9544 Abby Glen Circle Jacksonville, FL 32257 I EFFECTIVE DATE: if other than the date of filing: date is listed, the date must be spectic inscreted in this block does not meet ective date on the Department of State amed as registered agent to accept se familiar with and accept the appointment of the property of the specific inscrete in the specific inscrete in the specific inscrete in this block does not meet ective date on the Department of State inscrete in the specific inscrete ins	ific and cannot be more than five the applicable statutory filing requivers records. The records of process for the above statement as registered agent and agree to the statement agree to the statemen	days prior or 90 days after the filing irements, this date will not be listed as ed corporation at the place designated to act in this capacity
Name: Address: ARTICLE VIII Effective date, i (If an effective Note: If the da document's effet Having been notertificate, I am	INCORPORATOR address of the Incorporator is: Gaurav Shokeen 9544 Abby Glen Circle Jacksonville, FL 32257 I EFFECTIVE DATE: if other than the date of filing: date is listed, the date must be spectore in this block does not meet ective date on the Department of State amed as registered agent to accept see familiar with and accept the appointment of State Required Signature of Registered Signature S	the applicable statutory filing requires records. rvice of process for the above statuent as registered agent and agree to started Agent	days prior or 90 days after the filing irements, this date will not be listed as ed corporation at the place designated act in this capacity Toly, 11, 20
Name: Address: ARTICLE VIII Effective date, i (If an effective Note: If the da document's effet Having been no certificate, I am	INCORPORATOR address of the Incorporator is: Gaurav Shokeen 9544 Abby Glen Circle Jacksonville, FL 32257 I EFFECTIVE DATE: if other than the date of filing: date is listed, the date must be spectore in this block does not meet ective date on the Department of State amed as registered agent to accept see familiar with and accept the appointment of State Required Signature of Registered Signature S	the applicable statutory filing requires records. Tryice of process for the above statuent as registered agent and agree to started. Agent Therein are true. I am aware that any as provided for in s.817.155, F.S.	irements, this date will not be listed as ed corporation at the place designated act in this capacity Toly, 11, 20 Date Ty false information submitted in a document of the place of the corporation of the place designated act in this capacity.