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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)205-0381

From: Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA PROFIT CORPORATION OR P.A.

NOVAL CORPORATION

Certificate of Status	0
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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:
NOVAL CORPORATION

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:
5425 S. W. 117TH AVENUE
MIAMI, FL 33175

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:
100 Shares \$1.00 each one.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es)
ANDRES GARCIA
PRESIDENT, 100.00 SHARES OF STOCK
5425 S. W. 117TH AVENUE
MIAMI, FL 33175

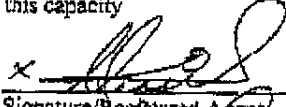
ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:
ANDES GARCIA
5425 S. W. 117TH AVENUE
MIAMI, FL 33175

ARTICLE VII INCORPORATOR

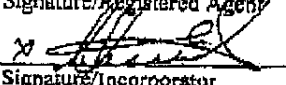
The name and address of the Incorporator is:
ANDRES GARCIA
5425 S. W. 117TH AVENUE
MIAMI, FL 33175

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

x 

Signature/Registered Agent

Date

x 

Signature/Incorporator

Date

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