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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : VCCRP SERVICES, LLC
Account Number : I20080000067
Phone : (845) 425-0077
Fax Number : (845) 818-3588

RECEIVED DEC 13 2011

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
Anovent, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

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11 DEC 13 AM 9:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
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Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

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

ARTICLE I NAME Anovent, Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

c/o % Sanomedics International
80 SW 8th St. Suite 2180 120V
Miami FL 33130

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any lawful purpose.

ARTICLE IV SHARESThe number of shares of stock is: 10,000,000 shares of common stock (\$0.0001 par value per share);
1,000,000 shares of preferred stock (\$0.0001 par value per share);**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Keith Houlihan, President and Director

Address: % Sanomedics International Holdi

80 SW 8th St. Suite 2180

Miami FL 33130

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Vcorp Services, LLC

Address: 5011 South State Road 7, Suite 106
Davie, Florida 33314**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

Name: Keith Houlihan

Address: 80 SW 8th St. Suite 2180
Miami FL 33130

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.

Isaac Muller, Manager of

Required Signature/Registered Agent

Vcorp Services, LLC

December 13, 2011

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

Required Signature/Incorporator

December 13, 2011

Date