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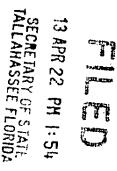
(Requestor's Name) (Address)				
(City/State/Zip/Phone #)	—			
PICK-UP WAIT . MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status	<u>-</u>			
Special Instructions to Filing Officer:				
14113-19847				

Office Use Only



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COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: SIM	PLEWEB INC.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	*****
PROM	lia Greenberg-Aguilar Name) Exchange Plac	e (Printed or typed)	oration.com
		Address	
N	ew York, NY 100	05	
	. City,	State & Zip	
87	77-330-2677		
	Daytime T	elephone number	
thi	ago@simpleweb.co	om.br	
		d for future annual report	notification)

NOTE: Please provide the original and one copy of the articles.



April 4, 2013

JULIA GREENBERG-AGUILAR 40 EXCHANGE PLACE SUITE 1301 NEW YORK, NY 10005

SUBJECT: SIMPLEWEB INC. Ref. Number: W13000019847

We have received your document for SIMPLEWEB INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 607.0802 or 617.0802, Florida Statutes, requires directors to be natural persons 18 years old or older.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 313A00008031

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

FILED

ARTICLE I NAM	Etion shall be: SIMPLEWEB INC.	S Cimes Cines Con
The name of the corpora	tion shall be:	13 APR 22 PH 1: 54
ARTICLE II PRI	NCIPAL OFFICE Principal street address	
RUA PASSARC	OS E FLORES, 56 #163	Mailing add SECRUITAM ISIF STATE TALLAHASSEE FLORIDA
		
SAO PAULO,	SP BRAZIL 04704	
ARTICLE III PUR	POSE	
	he corporation is organized is:	
Specialized in IT infra	astructure management, laaS (Infrastru	cture as a Service) and Cloud Computing solutions.
· · · · · · · · · · · · · · · · · · ·		
ARTICLE IV SHA The number of shares of	stock is: 100	
		
	TIAL OFFICERS AND/OR DIRECTOR	<u>s</u>
Name and Title	Thiago Vinhas de Moraes / President	Name and Title:
	Rua Passaros e Flores, 56 #163	
Address		Address:
	Sao Paulo, Brazil 04704	
Name and Title:		Name and Title:
Address		Address:
Name and Title		Name and Title:
		LANGE OF TABLE
Address		
		Address:
		Address:

FILED

Name and	d Title:	Name and Title:_	13 APR 22 PM 1: 54
Address		Address:	SECRETARY OF STATE TALLAHASSEE FLORIDA
		_	
ARTICLE VI	<u>REGISTERED AGENT</u> orida street address (P.O. Box NOT acceptable) of	the registered seem	4 :
Name:	InCorp Services, Inc.	the registered agen	t is:
Address:	17888 67th Court North		
	Loxahatchee, FL 33470		
ARTICLE VII	INCORPORATOR		Y
The name and ad	Idress of the Incorporator is:		
Name:	MyUSAcorporation.com		
Address:	40 Exchange Place, Suite 1301		
	New York, NY 10005		
	ned as registered agent to accept service of process am familiar with and accept the appointment as reg		
Marie Marie	Ancite (Afformey-in-	fact)	04/15/2013
7/ 7	Required Signature/Registered Agent		Date
	ument and affirm that the facts stated herein are t Department of State constitutes a third degree felony		
/	/ A hartar		04/15/2013
	Required Signature/Incorporator		Date

SPECIAL AND REVOCABLE LIMITED POWER OF ATTORNEY

TO ALL PERSON, be it known, that INCORP SERVICES, INC., A Nevada corporation as Grantor, does hereby make and grant a limited and specific power of attorney to Julia Greenberg-Aguilar and appoint and constitute said individual as my attorney-in-fact.

My named attorney-in-fact shall have full power and authority to undertake, commit and perform only the following acts on my behalf to the same extent as if I had done so personally; all with full power of substitution and revocation in the presence:

Authority to accept appointment as registered agent on behalf of InCorp Services, Inc. (a Nevada Corporation) for entities which *Selene Enterprises LLC dba MyUSA corporation.com* have purchased agent service on through their account with InCorp Services, Inc.

TERMINATION: Unless sooner revoked or terminated by me, the Special Power of Attorney shall become NULL and VOID from and after December 31, 2013.

Aurora Murtey, Secretary

Dated: December 10, 2012

Signed in my presence this the 10th day of December 2012 by Aurora Murtey, State of Nevada.

County of Clark

Notary Public in the State of Nevada

CHYSTAL TEMPLE-OWERS
Rotary Public, State of Herada
Appointment No. 09-11437-1
My Appt. Expires Nov-20, 2013