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☐ PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	1
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15 SEP 14 PK 4:5

W. Painer 9/14/15

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Ng 1 Technologies Inc.
Name of corporation - must include suffix
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
C. Mathica - Middle 1
Name of Person
1 1
Nga Technologies Inc.
2330 Mietaw W.
2330 Mietaw Dr. Address Sarus of A Tr 34239
Samsofa In 54239
City/State and Zip code Codonnell@ng1+ech.com
codonnell@naltoch.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Innthia O. Donnell at (941) 321 6494
Name of Person Area Code Daytime Telephone Number
STREET/COURIER ADDRESS: MAILING ADDRESS:
Registration Section Registration Section
Division of Corporations Division of Corporations
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314
Tallahassee, FL 32301
Enclosed is a check for the following amount:
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & □ \$78.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy Certified Copy

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

GIES INC.
Mailing address, if different is:
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ANY AND All
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ress: 2330 MERTAW .
Sanasota, Fl. 34239
ne and Title: Vrce Channan Man
ress: $\frac{P_1 O_2 B_0 \times 119}{\Lambda}$
DENUEL CO 8020/
ne and Title: PAEST AENT
ress: 2330 Macfaw Dr.
SANASOMA, FloraDA
34239

ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Cypthia D'DINNE! Address: J330 Mic faw M. Sana Sofa, Flore Day Josepha 34234 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Cypthia 34234 ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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	Name and Title:	Name and Title:
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Cypthia D'Dunell Address: J330 Michaw Dr. Sara Sofa, Flore Da 34234 ARTICLE VIII INCORPORATOR The name and address of the Incorporator is: Cypthia D'Donnell Name: Address: J330 Mechaw Dr. Sara Sofa, Flore Da 34339 ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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	Address	Address:
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ARTICLE VIII INCORPORATOR The name and address of the Incorporator is: CANTHEA DIDONNEL Name: Address: ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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	The name and Florida street address (P.O. Box Name:	DONNELL HAW DA.
Name: Address: Address: Address: Address: Address: ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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		Front 134239
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ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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	Name: _ = = Address: _ <u>2330 </u>	+AW DA Flanc DA 34339
the document's effective date on the Department of State's records. 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	Effective date, if other than the date of filing: (If an effective date is listed, the date must be	9/01/2015 (OPTIONAL)
this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity		
Required Signature/Registered Agent Date	Required Signature/R	egistered Agent 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 Required Signature/Incorporator	document to the Department of State constitutes	a third degree felony as provided for in s.817.155, F.S.