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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

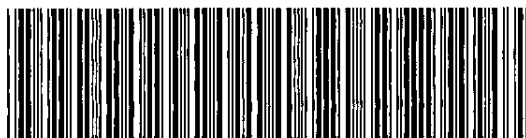
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**CORPORATE
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INC.**

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236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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FILING

Domestication

1. NEVIOT GROUP LIMITED

(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

CERTIFICATE OF DOMESTICATION

The undersigned, Sandra Alter, Director,
(Name) (Title)

of NEVIOT GROUP LIMITED a foreign corporation,
(Corporation Name)

in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was August 25, 1999.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was British Virgin Islands.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was NEVIOT GROUP LIMITED.
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 607.0202 and 607.0401 with this certificate is NEVIOT GROUP INC.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was British Virgin Islands.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am Sandra Alter, of NEVIOT GROUP LIMITED

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 17 day of December, 2015.



(Authorized Signature)

Filing Fee:	
Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	<u>\$ 78.75</u>
Total to domesticate and file	<u>\$128.75</u>

ARTICLES OF INCORPORATION
IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

NEVIOT GROUP INC.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address

21200 Point Place Apt. 1405
Aventura, Florida 33180

Mailing Address

C/O Michael Alter
P.O. Box 802722

Aventura, Florida 33280-2722

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

To conduct any lawful activity.

16 DEC 21 PM 3:51
RECORDED & INDEXED
HALL COUNTY CLERK
FLORIDA

FILED

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 100

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

Title/Name

Michael Alter, Director/P

21200 Point Place Apt. 1405

Aventura, FL 33180

Title/Name

Sandra Alter, Director/VP

21200 Point Place Apt. 1405

Aventura, FL 33180

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

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CLERK OF STATE
BIRMINGHAM, ALABAMA

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ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

Rozencwaig & Nadel, LLP

301 W. Hallandale Beach Blvd.

Hallandale Beach, FL 33009

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

Leslie Alan Rozencwaig, Esq.

301 W. Hallandale Beach Blvd.

Hallandale Beach, FL 33009

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SECRETARY OF STATE
HALLANDALE BEACH, FLORIDA

HAVING BEEN NAMED AS REGISTERED AGENT AND 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.


Signature/Registered Agent

12/17/15

Date


Signature/Incorporator

12/17/15

Date