

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : WILSON TAX & ACCOUNTING INC.
Account Number : I20150000107
Phone : (941) 625-1925
Fax Number : (941) 625-1526

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

Email Address: Lindsay@taxsaverstline+

FLORIDA LIMITED LIABILITY CO.
NovaRate Inc.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

FEB 07 2017

K. Brumbley

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: NovaRate Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

10 Yonge St.

Unit 910

Toronto, Ontario M5E 1R4 Canada

Mailing address, if different is:

1300 Enterprise Dr

Ste D

Port Charlotte, FL 33953

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Eric Rotberg President

Address: 10 Yonge St.

Unit 910

Toronto, ON M5E 1R4 Canada

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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TALLAHASSEE, FLORIDA

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Beth A Wilson
Address: 1300 Enterprise Dr Ste A
Port Charlotte, FL 33953

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Eric Rotberg
Address: 1300 Enterprise Dr Ste A
Port Charlotte, FL 33953

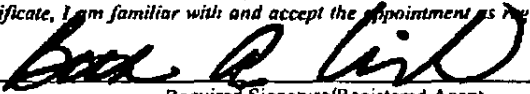
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)


(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 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

 2/6/17
Required Signature/Registered 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.

 2/6/17
Required Signature/Incorporator Date