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K. PAGE

COVER LETTER

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

SUBJECT: NO	IVEQU Riche I	ocorporated	
Enclosed are an orig	ginal and one (1) copy of the arti	cles of incorporation and	d a check for:
☐ \$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED
from:	-nc Tawaan (
	11571 Mony	ment Lake Cir	cle

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

Mouvedur che 0118@amdil.com
E-mail address: (to be used for future annual report notification)

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

The name of the corpora	tion shall be: Nouveau	Riche I	ocor f	porated		
_	<u>CIPAL OFFICE</u> Principal <u>street</u> address S. Blud., Jacksonville,	_	Mailing address, if different is: P.O. Box 16277			
Florida, 3222	4, Apt 712	-	Zacks	spaville, Flor	cda,3224*	ว์
ARTICLE III PURPO The purpose for which t	DSE he corporation is organized is: <u>A</u> r	ny lawful	-bncbc	use.		
					ralle	
	stock is: <u>1()()</u> (<i>L OFFICERS AND/OR DIRECT</i> (_			HET 26 PM 12: 3 RETARY OF STATE AHASSEE, FLORID	FILED
Name and Title Address	:: Eric Jawaan Geldes CEOIS 11571 Monument Lak			NIN		
, 13G1 exx.	Jack Sonville, Florida, 3		, v3.3-			
Name and Title:	nla	Name	and Title:	NIA		
Address		Addre	2SS:	NIA		
Name and Title:	NIA	Name				
Address	_NI_A_	Addre	:ss:	NIY		

Name and Title	:NIA	Name and Title	e:_NIA		
Address	AIA	_ Address:	AIA		
		_			
		_			
	STERED AGENT street address (P.O. Box NOT acceptable) o	f the registered ag	gent is:		
Name:	equie Kercheval	•			
Address:	egine Kercheval TT Normandy Rud A acksonville, FL 32221	p+921			
_2,	acksonuille, Fl 32721	-			
ARTICLE VII INCO.	<u>RPORATOR</u>			TALL	2017
The name and address	of the Incorporator is:			AHA AHA	030
Name: _	Fric J Geddes	-		SSEE SRY	26
Address:	11571 Marmont Lake	_		OF S	PH 12:
Ţ,	Circle, Tacksonville, Florida 3222	5		TATE ORIDA	12: 39
ARTICLE VIII EFFI Effective date, if other t (If an effective date is t filing.)	han the date of filing: 1000000000000000000000000000000000000	2018 . (C	PPTIONAL) five days prior or 90 days 2	after th	e
	ed in this block does not meet the applicable edate on the Department of State's records.	statutory filing r	equirements, this date will n	ot be lis	ted as
Having been named as this certificate, I am fan	registered agent to accept service of process niliar with and accept the appointment as reg	for the above st sistered agent an	ated corporation at the plac d agree to act in this capacit	e design v	nated in
17-47-1	Required Signature/Registered Agent		1a/a _{Da}	<u>/20</u> ate	17
I submit this document document to the Departs	and affirm that the facts stated herein are ment of State constitutes a third degree felon	true. I am awar y as provided for	e that the false information r in s.817.155, F.S.	submitt	ted in a
Required Sig	nature/Incorporator		December	<u>- 21</u> ,2	017