Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

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From:

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Phone : (305)552-5973

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P 1	Address:			

FLORIDA PROFIT/NON PROFIT CORPORATION **NEXNOVA CORP**

Certificate of Status	0
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Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

	NEXNOVA CORP					
	ARTICLE II PRINCIPAL OFFICE:					
	The principal street address and mailing address is:					
	3105 NW 107TH AVE SUITE 400 C-1					
 -	DORAL FL 33172					
ARTICLE	ZIII SHARES: The number of shares of stock is: 100	<u>. </u>				
A	RTICLE IV INITIAL DIRECTORS AND/OR OFFI	CERS:				
	PRESIDENT- KARINA ALEJANDRA MONTEIRO RAMOS					
	3105 NW 107TH AVE SUITE 400 C-1					
**************************************	DORAL FL 33172	אררי הבפוני אררי				
	SECRETARY- WALDO CANALS	HAS				
	3105 NW 107TH AVE SUITE 400 C-1	SEE				
	FLO					
		20 N				
ARTICL	EV INITIAL REGISTERED AGENT AND STREET	ADDRESS:				
The name	and Florida street address (PO Box not acceptable) of the reg	istered agent is:				
	KARINA ALEJANDRA MONTEIRO RAMOS					
	3105 NW 107TH AVE SUITE 400 C-1					
	DORAL FL 33172					
ARTICLE	EVI INCORPORATOR: The name and address of the I	ncorporator is:				
	KARINA ALEJANDRA MONTEIRO RAMOS					
	3105 NW 107TH AVE SUITE 400 C-1					
	DORAL FL 33172					

Required Signatures:

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

Mariane African 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 8.817.155, F.S.

Incorporator Date

FILED

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SEURETAKN OF STATE
TALLAHASSEE, FLORID