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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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**FLORIDA PROFIT/NON PROFIT CORPORATION
NOA CARRIER CORP.**

Certificate of Status	0
Certified Copy	1
Page Count	03
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Electronic Filing Menu

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2nd Request

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

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ARTICLE I NAME: The name of the corporation is:NOA CARRIER CORP.**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

9313 SW 39 STMIAMI FL 33165**ARTICLE III SHARES:** The number of shares of stock is: 100.**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Aureliano NOA Borges (P)18 JUL 25 AM 9:11
SECRETARY OF STATE
DIVISION OF CORPORATIONS**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

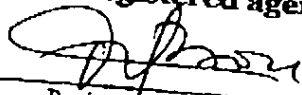
Aureliano NOA Borges9313 SW 39 STMIAMI FL 33165**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:AURELIANO NOA BORGES9313 SW 39 STMIAMI FL 33165

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H18000211937

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



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.



Incorporator

Date

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