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	To:	
		Division of Corporations
		Fax Number : (850)617-6381
	From:	Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
_		Account Number : I20000000019
54	17.5	Phone : (305)552-5973
; <del>;</del>	: <del>-,</del> ''	Fax Number : (305)675-5944
PH		( C)
<u> </u>	*****	the email address for this business entity to be used for fuller
25	an	nual report mailings. Enter only one email address please.**
2020 JUTE 1	Ess	ail Address:
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## FLORIDA PROFIT/NON PROFIT CORPORATION NODA RENTA CAR INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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T. SCOTT

·i,

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

	ARTICLE I NAME: The name of the corporation is:
	NODA RENTA CAR INC
	ARTICLE II PRINCIPAL OFFICE:
	The principal street address and mailing address is:
ARTI	CLE III SHARES: The number of shares of stock is: 100
	ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
	MARIO NODA GONZAlez (P)
	282
-	
	Since 2
	FI.012:
	TE TO TO THE TO
AR	TICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The r	name and Florida street address (PO Box not acceptable) of the registered agent is:
	MARIO NODA GONZALEZ
	640 SW 62 AVE
	MIAMI FL 33144
<u>AR</u>	TICLE VI INCORPORATOR: The name and address of the Incorporator is:
	MARIO NODA GONZA/EZ
	640 SW 62 AVE
	MIAMIFI 33144

## 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 I ate