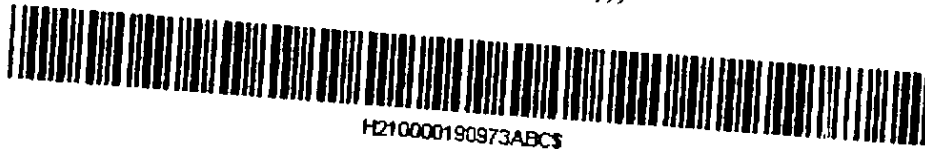


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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
NOMGUEVA, INC

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: NOMGUEVA, INC**ARTICLE II PRINCIPAL OFFICE**Principal street address14709 SW 25th St

Mailing address, if different is:

14709 SW 25th StMIAMI, FL 33185MIAMI, FL 33185**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

21 JAN 14 AM 11:51

ARTICLE IV SHARESThe number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: P: ANTUAN J. NOMNON N.Name and Title: VP: SAUL ALBERTO F. GUEVARA R.Address 14709 SW 25th StAddress: 14709 SW 25th StMIAMI, FL 33185MIAMI, FL 33185

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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: ANTUAN J. NOMNON N.
Address: 14709 SW 25th St
MIAMI, FL 33185

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: ANTUAN J. NOMNON N.
Address: 14709 SW 25th St
MIAMI, FL 33185

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 01/12/2021 (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

☒

Required Signature/Registered Agent

01/12/2021

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.

☒

Required Signature/Incorporator

01/12/2021

Date