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DATE: 7/14/2021

NAME: NEXAGEN, INC.

TYPE OF FILING: ARTICLES

COST: 70.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODO

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

TICLE I NAME name of the corp	ME pration shall be: Ne	exagen, Inc.		
	NCIPAL OFFICE Principal street address		Mailing address, if different is:	
and O' Lake, F	POSE			
	th the corporation is organized is: <u>To</u>			
			2. 8	
RTICLE IV SHA te number of shares	<u>RES</u> of stock is: 20,000,000		JUL IL AM 9: 43	Ċ.
	<u>TAL OFFICERS AND/OR DIRECT</u> itle: Rupal Parikh, President		Rajesh Parikh, Chief Ope	rating Of
Address	17167 Hallandale Loop	Address:	17167 Hallandale Loop	
	Apt. 301		Apt. 301	
<u> </u>	Land O' Lake, FL 34638		Land O' Lake, FL 34638	
Name and Tit	le:	Name and Title	<u> </u>	
Address		Address:		
		<u> </u>		
Name and Titl	e:	Name and Title:		
Address				
		<u> </u>		

Name a	nd Title:	_ Name and Title:		<u> </u>
Addres	s	_ Address:		
<u>ARTICLE VI</u> The <u>name and F</u>	<u>REGISTERED AGENT</u> lorida street address (P.O. Box NOT acceptable) o	f the registered agent is	s:	
Name:	Florida Filing & Search Services, Inc.	_		
Address:	155 Office Plaza Drive	_	2 2	
	Tallahassee, FL 32302			-17
ARTICLE VII	INCORPORATOR		2021 JUL 14	
The name and a	ddress of the Incorporator is:			
Name:	Karen A. Kapsimalis	_	AH 9: 43	تب
Address:	c/o LEX II Services, Inc., 272 Dunns	Mill Road, #311		
	Bordentown, NJ 08505			

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _

. (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

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

filing.)

Required Signature/Registered Agent

7/14/21

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.

0 Required Signature/Incorporator

July 14, 2021 Date