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Florida Department of State
Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
BIO-NOVA SERVICES, INC**

Certificate of Status	0
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TALLAHASSEE, FLORIDA

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S. CHATHAM

MAR -1 2022

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEBIO-NOVA SERVICES, INC
The name of the corporation shall be: _____**ARTICLE II PRINCIPAL OFFICE**Principal street address

9020 NW 8 ST

APT 320

MIAMI, FL 33172

Mailing address, if different is:

9020 NW 8 ST

APT 320

MIAMI, FL 33172

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ANY AND ALL LAWFUL BUSINESS

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**ARTICLE IV SHARES**100
The number of shares of stock is: _____**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: P: EMILIO A. NIEVES M Name and Title: VP: MARIANELA MARTINEZ O

Address 9020 NW 8 ST Address: 9020 NW 8 ST

APT 320

APT 320

MIAMI, FL 33172

MIAMI, FL 33172

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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Name and Title: _____	Name and Title: _____
Address _____	Address: _____
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_____	_____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**ARTICLE VI REGISTERED AGENT**The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: EMILIO A. NIEVES M
 Address: 9020 NW 8 ST. APT 320
 MIAMI, FL 33172

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

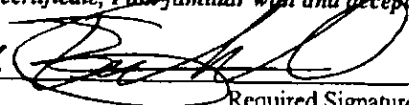
Name: EMILIO A. NIEVES M
 Address: 9020 NW 8 ST. APT 320
 MIAMI, FL 33172

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 02/28/2022 (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*

X 
 Required Signature/Registered Agent

02/28/2022

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.

X 
 Required Signature/Incorporator

02/28/2022

Date