

P23000032658

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H23000152570 3)))



H230001525703ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : FASTKIT CORP  
Account Number : I20100000009  
Phone : (305)599-0839  
Fax Number : (305)592-9591

\*\*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  
NOVA SERVICES USA, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

RECEIVED  
2023 APR 24 PM 4:09  
REGISTRARS  
OFFICIAL  
SERVICES

2023 APR 24 AM 11:36  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

Electronic Filing Menu Corporate Filing Menu Help

**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME**

The name of the corporation shall be: NOVA SERVICES USA, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal ~~street~~ address  
4572 SW 132 ST  
OCALA, FL 34473

Mailing address, if different is:  
SAME ADDRESS

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: JANITORIAL SERVICES

**ARTICLE IV SHARES**

The number of shares of stock is: 100 SHARES PER VALUE \$1.00

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: YAMILET GROSS HIDALGO GATO Name and Title: \_\_\_\_\_

Address: 4572 SW 132 ST Address: \_\_\_\_\_

OCALA, FL 34473 \_\_\_\_\_

PRESIDENT \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

2023 APR 24 AM 11:36  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

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: YAMILET GROSS HIDALGO GATO  
 Address: 4572 SW 132 ST  
OCALA, FL 34473

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: YAMILET GROSS HIDALGO GATO  
 Address: 4572 SW 132 ST  
OCALA, FL 34473

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

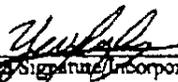
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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

 \_\_\_\_\_ 03/13/2023  
 Required Signature/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.

 \_\_\_\_\_ 03/13/2023  
 Required Signature/Incorporator Date

2023 APR 24 AM 11:36  
 SECRETARY OF STATE  
 TALLAHASSEE, FL

FILED