P24000067625

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.

(((H24000363335 3)))

H24000363335 3ABCS

RECEIVED
2024 OCT 31 PM 3:40
SECRETARY OF STATE
TALLAHASSEE, FL

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 : CAPITOL SERVICES, INC.
Account Number : I20160000017
Phone : (855)498-5500
Fax Number : (800)432-3622

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

NVL Shareholder Investors, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	$78.75

RECEIVED
2024 OCT 31 PM 3:11
SECRETARY OF STATE
TALLAHASSEE, FL

FILED
2024 OCT 31 PM 3:18
SECRETARY OF STATE
TALLAHASSEE, FL

Electronic Filing Menu Corporate Filing Menu Help

COVER LETTER

H24000363335 3

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: NVL Shareholder Investors, Inc.
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ $70.00 Filing Fee

☐ $78.75 Filing Fee & Certificate of Status

☐ $78.75 Filing Fee & Certified Copy

☑ $87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: Matt Smith, Esq.
Name (Printed or typed)

8150 N. Central Expressway, Suite 1100
Address

Dallas, TX 75206
City, State & Zip

(972) 665-9600
Daytime Telephone number

karan@nvlabs.net
E-mail address: (to be used for future annual report notification)

FILED
2024 OCT 31 PM 3:18
SECRETARY OF STATE
TALLAHASSEE, FL

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

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

H24000363335 3

ARTICLE I NAME

The name of the corporation shall be: NVL Shareholder Investors, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal **street** address

4400 NW 133rd Street
Opa-Locka, FL 33054

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To engage in any lawful business activities for which a corporation may be organized under the laws of Florida.

ARTICLE IV SHARES

The number of shares of stock is: One Thousand (1,000)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Karan Arora, President

Address: 5337 SW 183rd Avenue
Miramar, FL 33029

Name and Title: Tejas Choksi, Vice President and Secretary

Address: 1991 SW 164th Avenue
Miramar, FL 33027

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

FILED
2024 OCT 31 PM 3:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H24000363335 3

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: Karan Arora

Address: 4400 NW 133rd Street

Opa-Locka, FL 33054

FILED
2024 OCT 31 PM 3:18
SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE VII INCORPORATOR

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

Name: Matthew Smith, Esq.

Address: 8150 N. Central Expressway, Suite 1100

Dallas, TX 75206

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

Karan Arora — 10/31/2024

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.

Matt Smith — 10/31/2024

Required Signature/Incorporator — Date