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FLORIDA DIVISION OF CORPORATIONS PUBLIC ACCESS SYSTEM ELECTRONIC FILING COVER SHEET

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TO: DIVISION OF CORPORATIONS FAX #: (850)922-4001

FROM: FAS-T CORP. AGENTS, INC.

ACCT#: 071001002335

CONTACT: LIDIA FERNANDEZ PHONE: (305)599-0839

FAX #: (305)716-0346

NAME: NOVASAGE INC.

AUDIT NUMBER..... H98000002280

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. DF STATUS..1

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ARTICLES OF INCORPORATION

<u>OF</u>

NOVASAGE INC.

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE I NAME

The name of the corporation shall be:

NOVASAGE INC.

The principal place of business of this corporation shall be:

5867 S.W. 59 STREET MIAMI, FL 33143

ARTICLE IL NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is:

100 SHARES AT \$1.00 PAR VALUE

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

SIXTO J. NOVATON 5867 S.W. 59 ST. MIAMI,FL 33143

PREPARED BY: SIXTO J.NOVATON 5867 S.W. 59 ST. MIAMI,FI, 33143 (305)663-8832

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

SIXTO J. NOVATON 5867 S.W. 59 STREET MIAMI, FL 33143

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 3rd day of FEBRUARY, 1998.

Signature(s) of Incorporator(s)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida,

me of the corporation:
NOVASACE INC.
me and address of the registered agent and office is:
SIXTO J. NAVATON 5867 S.W. 59 STREET
(P.O. BOX NOT ACCEPTABLE)
MIAMI,FL 33143
(CITY/STATE/ZIP)
SIGNATURE PRESIDENT TITLE PRESIDENT DATE

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE	1. Naute
DATE FEBRUARY 3,1998	