

P99000094412
TRANSMITTER LETTER

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

800003023883--4
-10/25/99--01099--004
*****78.75 *****78.75

SUBJECT: TecniNova, Inc.
(Proposed corporate name - must include suffix)

Enclosed is 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: Alvaro Cuervo
Name (Printed or typed)

1349 Seagrape Circle
Address

Weston, FL 33326
City, State & Zip

(954) 349-1508
Daytime Telephone number

FILED
99 OCT 25 PM 4:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

10-26
10C

Articles Of Incorporation

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of this corporation is:

TecniNova, Inc.

ARTICLE II PRINCIPAL OFFICE

The mailing address of the Corporation is:

TecniNova, Inc.
1349 Seagrape Circle
Weston, FL 33326

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is TWO HUNDRE (200) shares of common stock, par value \$10.00 per share.

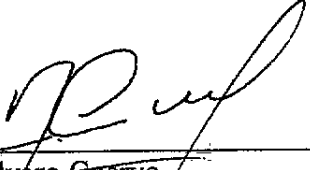
ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and Florida street of the initial registered agent are:

Alvaro Cuervo
1349 Seagrape Circle
Weston, FL 33326

The name and address of the incorporator to these articles are:

Alvaro Cuervo
1349 Seagrape Circle
Weston, FL 33326



Alvaro Cuervo
Registered Agent/Incorporator

10/22/99

Date

I accept the responsibilities of Registered Agent

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