F2100004255

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(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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2021 JUL 16 PH 3: 56

JUL 16 PH 3: 56

JUL 28 2021 M. SOLOMON

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJI	ECT:	NEUROPLANET USA CORP			
5000		Name of	corporation	- must include suffix	
Dear Si	ir or M	adam:			
"Certifi	icate of	"Application by Foreign Con Existence." or "Certificate of ced foreign corporation to tra	f Good Stan	iding" and check are submitt	
Please	return a	all correspondence concernin	g this matter	to the following:	
		G	ABRIEL AC	QUARONE	
•			Name of	Person	
		GAA	KEY CONS	ULTING, LLC	
			Firm/Con	npany	
		104 CRA	NDON BLV	D, SUITE 300-A	
			Addre	ess	
		K	EY BISCAY.	NE, FL 33149	
		· · · · · · · · · · · · · · · · · · ·	City/State a	nd Zip code	
		G	ABRIEL@G	AAKEY.COM	
		E-mail address:	(to be used t	for future annual report notif	ication)
For fur	ther inf	Cormation concerning this ma	tter, please c	call:	
GABRIEL AG		QUARONE	t (305 Area Cod	775-4073	
	Name	of Person	Area Cod	e Daytime Telephone	e Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			:	MAILING ADD Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 3	on orations
	nake ch	check for the following amount to the payable to: FLORIDA DEFINE THE STREET THE PARTY	PARTMENT Fee &		3 \$87.50 Filing Fee. Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

	able in Florida, enter alternate corporate name ac		
DELAWARE 3.		87-1048558 (FEI number, if applicable)	
No. 261- 2021			
. (Date	of incomparation) 5.	(Date of duration, if other than perpetual)	
	of mediporation)	(Date of duration, if other than pe	apetuary
104 CP ANDON	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150	2, F.S., to determine penalty liability)	
'	BLVD., STE 300-A, KEY BISCAYNE, FL 331	street address)	
	(1 meipar omee	street addressy	·.·
	(Current mailing	address, if different)	
			• 1
. Name and street	et address of Florida registered agent: (P.O.	Box NOT acceptable)	. 17
Name:	GAA KEY CONSULTING, LLC		71.50 50 50 50 50 50
Office Address:	328 CRANDON BLVD STE 119-308		07.7 07.8 07.8 07.8
	KEY BISCAYNE	, Florida 33149	
	(City)	(Zip code)	

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

(Registered agent's signature)

□ Chairman	Name:EDUARDO SANCHEZ	Chairman	VERONICA CANEPA	
□Vice Chairman	Address:104 CRANDON BLVD.	☐Vice Chairman	Address: 104 CRANDON BLVD.	
Director	SUITE 300-A	— □ Director	SUITE 300-A	
President	KEY BISCAYNE, FL 33149	☐ President	KEY BISCAYNE, FL 33149	
ElVice President		Vice President		
☐ Secretary	Treasurer	Secretary	☐Treasurer	
Other	Other	□Other	Other	
Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		Director	<u> </u>	
□President		President		
□Vice President		□ Vice President		
☐ Secretary	□Treasurer	☐ Secretary	□ Treasurer	
Other	Other	Other	Other 5	
□ Chairman	Name:	_ Chairman	Name:	
□ Vice Chairman	Address:	□Vice Chairman	Address. Sp. 45	
□Director		Director		
□President		President		
□Vice President		□ Vice President		
☐ Secretary	□Treasurer	☐ Secretary	Treasurer	
Other	Other	Other	Other	
	-	n number 11 above) affirms th	nat the facts stated herein are true and that he or ttes a third degree felony as provided for in	



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "NEUROPLANET USA CORP." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE SECOND DAY OF JULY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NEUROPLANET USA CORP." WAS INCORPORATED ON THE TWENTY-SIXTH DAY OF MAY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES

HAVE BEEN ASSESSED TO DATE.

Authentication: 203597023

Date: 07-02-21



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 30, 2021

GABRIEL ACQUARONE GAA KEY CONSULTING, LLC 104 CRANDON BLVD, SUITE 300-A KEY BISCAYNE, FL 33149

SUBJECT: NEUROPLANET USA CORP.

Ref. Number: W21000094269

We have received your document for NEUROPLANET USA CORP. and check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Mel Solomon
Senior Section Administrator

Recht?

Letter Number: 321A00014949