Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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From:

Account Name : E & F LATIN GROUP LLC

Account Number : 120160000049
Phone : (954)384-8565
Fax Number : (954)385-5175

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FLORIDA PROFIT/NON PROFIT CORPORATION NEUMOMED CORP

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COVER LETTER

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

SUBJECT: NEUMO	OMED CORP (PROPOSED CORPOR	ATE NAME - MUST INCL	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	a check for:
\$70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate o Status PY REQUIRED
FROM: E&I	FLATIN GROUP LLC Nam	e (Printed or typed)	
1820	N CORPORATE LAKES BLVD		
WES	STON, FL 33326	Addross State & Zip	
954	384 8565 Daytime 1	clephone number	
DIEC	ROGEFLATINACCOUNTING.CC	·	otification)

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)

Principal of street address SO BRICKELL BAY DR APT 3605 AIAMI, FL 33131		Mailing address, if different is: 950 BRICKELL BAY DR APT 3605 MIAMI, FL 33131					
				CLE III PUR irpose for which	POSE at the corporation is organized is: All Lawfu	11 Ригровея	
		·					
ULE IV SUA umber of shares (RES of stock is: 1000						
CLE V NIT	RES of stock is: 1000 IAL OFFICERS AND/OR DIRECTORS tle: JUAN C. SALAS - P		c: CLAUDIA P. DIAZ- VP 950 BRICKELL BAY DR				
CLE IV SHA ember of shares of TLE V INIT Name and Ti	RES Of stock is: 1000 MAL OFFICERS AND/OR DIRECTORS (le: JUAN C. SALAS - P 950 BRICKELL BAY DR APT 3605 APT 3605	Name and Titl Address:	e: CLAUDIA P. DIAZ- VP 950 BRICKELL BAY DR APT 3605				
CLE IV SHA ember of shares of TLE V INIT Name and Ti	RES Of stock is: 1000 MAL OFFICERS AND/OR DIRECTORS (le: JUAN C. SALAS - P 950 BRICKELL BAY DR APT 3605 APT 3605	Name and Titl Address:	c: CLAUDIA P. DIAZ- VP 950 BRICKELL BAY DR				
CLE V SHA Name and Ti Address	RES Of stock is: 1000 MAL OFFICERS AND/OR DIRECTORS (le: JUAN C. SALAS - P 950 BRICKELL BAY DR APT 3605 APT 3605	Name and Titl Address:	e: CLAUDIA P. DIAZ- VP 950 BRICKELL BAY DR APT 3605 MIAMI, FL 33131				
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CLEIV SHA umber of shares of TLE V INIT Name and Ti Address Name and Tit Address	RES of stock is: 1000 IAL OFFICERS AND/OR DIRECTORS Ile: JUAN C. SALAS - P 950 BRICKELL BAY DR APT 3605 APT 3605 MIAMI, FL 33131	Name and Titl Address: Name and Titl Address:	950 BRICKELL BAY DR APT 3605 MIAMI, FL 33131				

Name	and Title:	Name and Title:
Addre	ys	Address:
		_
ARTICLE VI	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable)	of the registered agent is:
Name:	E&F LATIN GROUP LLC	_
Address:	1820 N CORPORATE LAKES BLVD	
	SUITE 109, WESTON, FL 33326	_
<u>ARTICLE YII</u>	INCORPORATOR	
The <u>name and</u>	address of the incorporator is:	
Nune:	DIEGO FIGUEROA	_
Address:	1820 N CORPORATE LAKES BLVD	
	SUITE 109, WESTON, FL 33326	_
Diffective date	EFFECTIVE DATE: if other than the date of filing: 6/21/2021 date is listed, the date must be specific and cannot	. (OPTIONAL) of be more than five days prior or 90 days after the
Note: If the dathe document's	te inserted in this block does not meet the applicable effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as
Having been no this certificate,	nmed as registered agent to accept service of process I am familiar with and accept the appointment as re	x for the above xtated corporation at the place designated in gistered agent and agree to act in this capacity
\mathcal{L}	Dialo tollogod	6/21/2021
	Required Signature/Registered Agent	Date
I xubmit this do document to the	ocument and affirm that the facts stated herein are Department of State constitutes a third degree felot	true. I am aware that the false information submitted in a ny as provided for in s.817.155, F.S.
\mathcal{I}_{l}	HEORD TRUMPING.	6/21/2021
Page	nired Simpture/Incomorator	Date