Division of Corporations
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To: Division of Corporations Fax Number : (850)617-6381 From: Account Name : MARKO & MAGOLNICK, P.A. Account Number : I20050000186 : (305)285-2000 : (385)285-5555 Fax Number **Enter the email address for this business entity to be used for future. annual report mailings. Enter only one email address please.** componatesenvices@mm-pa.com Email Address: **DOMESTICATION** NEOTERRA INSURANCE SERVICES, INC. Certificate of Status 0 Certified Copy 01 Page Count \$120.00 Estimated Charge

Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER

Department of State

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

SUBJECT:

NEOTERRA INSURANCE SERVICES, INC.

Enclosed is an original and one (1) copy of the Articles of Domestication and a check:

PPES:

Certificate of Domestication

\$ 50.00

Articles of Incorporation and Certified Copy § 78.75

Total filing fee

\$128.75

OPTIONAL:

Certificate of Status

\$ 8.75

From: David E. Marko, Esq.

Name (printed or typed)

3001 SW 3rd Ave

Address

Miami, Florida, 33129

City, State & Zip

305-285-2000

Daytime Telephone Number

corporateservices@mm-pa.com

E-mail address: (to be used for future annual report notification)

INHS53 (3/20)

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Articles of Domestication Foreign Corporation Domesticating to Florida

The undersigned, Andre M Scroggie	President	
(Name)	(Title)	:
of NEOTERRA INSURANCE SERVICES,	, INC. a foreign	:
corporation, in accordance with s. 607.11922, Florida	a Statutes, submit these Articles of	
Domestication.	NECTERRA INSURANCE SERVICES, INC.	
Then name of the domesticating corporation	(Foreign Corporation)	- !
2. The jurisdiction and date of its formation is	 California, 09/06/2013	<u> </u>
3. The name of the domesticated corporation is	NEOTERRA INSURANCE SERVICES, INC.	-
4. The jurisdiction of formation of the dumestic	ated corporation is Florida	
The domestication corporation is a foreign co approved in accordance with its organic law.	orporation and the domestication was	2023 5ALL T
 Attached are Florida Articles of Incorporation requirements pursuant to s.607.0202, F.S. 	to complete the domestication	JUL 3/
I certify I am authorized to sign these Articles of Dorr	nestication on behalf of the corporation.	P. T.
(Authori	ized Signature))

ARTICLES OF INCORPORATION

DIAML

IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME	
THE NAME OF THE CORPORATION SHALL HE:	
NEOTERRA INSURANCE SERVICES, INC.	
ARTICLE II PRINCIPAL OFFICE	·
THE PRINCIPAL PLACE OF BUSINESS/MAILING A	DDRESS IS:
Principal Address	Mailing Address
3601 SW 3rd Ave	
Miami, Florida 33129	
ARTICLE III PURPOSE THE PURPOSE FOR WHICH THE CORPORATION I Any and all lawful business.	IS ORGANIZED:
ARTICLE IV SHARES THE NUMBER OF SHARES OF STOCK IS: 100,000	<u> </u>
ARTICLE VI REGISTERED AGI	ENT AND STREET ADDRESS
THE NAME AND FLORIDA STREET ADDRESS (P.	O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:
M&M RA Services, LLC	
3001 SW 3rd Ave	·
Miami, Florida, 33129	·
ABOVE STATED CORPORATION AT THE PLACE	TT AND TO ACCEPT SERVICE OF PROCESS FOR THE DESIGNATED IN THIS CERTIFICATE, I AM FAMILIAR GISTERED AGENT AND AGREE TO ACT IN THIS
CAPACITY.	07/98/2023
Signature/Rogistered Agent	Date

ARTICLE V DIRECTORS AND/ OR OFFICERS

	Andre M Scroggic, Presid 3001 SW 3rd Ave	∧ddress:	
Addross:	Miami, Florida 33129	Address.	
Name & Title:		Name & Title:	
Address:		Address:	
		-	
Nama & Titla		Name & Title;	
		Address:	
Address:		7(001°033	
Name & Title:		Name & Title:	
Address:		Address:	
		-	
		-	
thmit this doc ormation subm vided for in s.	ument and offirm that the facts s litted in a document to the Depar 817.155.F.S.	tated herein are true timent of State cons	. I am aware that false titutes a third degree felony as
	ω α £3;		July 28 2023

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