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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019
Phone : (305)552-5973
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FLORIDA PROFIT/NON PROFIT CORPORATION YRN SOLUTIONS CORP

Certificate of Status	0
Certified Copy	1
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1/12/24

ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

	ARTICLE II PRINCIPAL OFFICE:
	The principal street address and mailing address is:
220 W <u>63RD S</u>	THIALEAH FL 33012
ARTICLE III	SHARES: The number of shares of stock is: 100
ARTIC	LE IV INITIAL DIRECTORS AND OR OFFICERS:
MARIO CABRERE	A -PRESIDENT
RAYK <u>O BÉLLMAS</u>	_ Vice President
	
ARTICLE V	INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Fl	orida street address (PO Box not acceptable) of the registered agent is
20 W <u>63RD ST HI</u>	ALEAH FL 33012
AYKO BELLMAS	
·	
ARTICLE VI	INCORPORATOR: The name and address of the Incorporator is
YK <u>O BELLMAS 2</u>	20 W 63RD ST HAILEAH FL 33012
<u> </u>	

Required Signatures:

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.