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13053284774

From: Yanet Avila

3/4/24, 12:58 PM

Division of Corporations

Florida Department of State
Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
MERA NEW YORK INC**

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From: Yanet Avila

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: NERA NEW YORK INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

207 EAST 57TH APT 20-A
NEW YORK, NY 10022

Mailing address, if different is:

200 BISCAYNE BLVD WAY #5301
MIAMI FL 33131

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 777 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SUSANA GALLEGOS- P.S Name and Title: _____

Address 200 BISCAYNE BLVD WAY #5301 Address: _____
MIAMI FL 33131

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: TRANSACTION ADVISORS & CONSULTANTS LLC
Address: 8724 SUNSET DR #445
MIAMI FL 33173

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: SUSANA GALLEGO
Address: 200 BISCAYNE BLVD WAY #5301
MIAMI FL 33131

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

/s/ Manuel M. Arrese

Required Signature/Registered Agent

Date

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.

/s/ Susana Gallego

Required Signature/Incorporator

Date