

To:

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2024-04-10 18:25:43 GMT

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From: Yanet Avila

4/10/24, 2:20 PM

Division of Corporations

P24000025035

Florida Department of State

Division of Corporations

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**FLORIDA PROFIT/NON PROFIT CORPORATION
NMCANCLAS FL, CORP**

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TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: NMCANCLAS FL, CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address20720 NW 5 STPembroke Pines, FL 33029

Mailing address, if different is:

20720 NW 5 STPembroke Pines, FL 33029**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: SHARES: 100 @ \$1.00**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: NMCANCLAS LIMITED - P

Name and Title: _____

Address 20720 NW 5 ST

Address: _____

Pembroke Pines, FL 33029

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

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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: Jose I. Padial, PA
Address: 7830 SW 84 CT
Miami, FL 33143

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: NMCANCLAS LIMITED
Address: 20720 NW 5 ST
Pembroke Pines, FL 33029

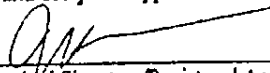
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 4/10/2024. (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


Required Signature/Registered Agent

4/10/2024

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.817.133, F.S.


Required Signature/Incorporator

Date

09.04.24