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(City/State/Zip/Phone #)

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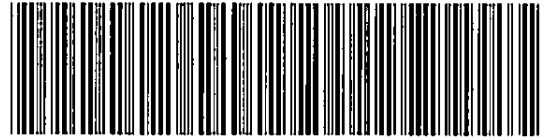
(Business Entity Name)

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## COVER LETTER

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

SUBJECT: CM ROCK CORP.

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

FEES:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total filing fee	\$128.75

OPTIONAL:

Certificate of Status	\$ 8.75
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**From:** CM ROCK CORP.

Name (printed or typed)

100 WALL ST, 10th FL

Address

NEW YORK, NY 10005

City, State & Zip

202-509-4745

Daytime Telephone Number

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


Articles of Domestication  
Foreign Corporation Domesticating to Florida

The undersigned, Yos Gainza Director  
(Name) (Title)

of CM ROCK CORP., a foreign  
corporation, in accordance with s. 607.11922, Florida Statutes, submit these Articles of  
Domestication.

1. Then name of the domesticating corporation is CM ROCK CORP.  
(Foreign Corporation)  
\_\_\_\_\_.
2. The jurisdiction and date of its formation is New York 12/09/1997
3. The name of the domesticated corporation is CM ROCK CORP.  
\_\_\_\_\_.
4. The jurisdiction of formation of the domesticated corporation is **Florida**
5. The domestication corporation is a foreign corporation and the domestication was  
approved in accordance with its organic law.
6. Attached are Florida Articles of Incorporation to complete the domestication  
requirements pursuant to s.607.0202, F.S.

I certify I am authorized to sign these Articles of Domestication on behalf of the corporation.

  
\_\_\_\_\_  
(Authorized Signature)

**ARTICLES OF INCORPORATION**  
*IN COMPLIANCE WITH CHAPTER 607, F.S.*

**ARTICLE I    NAME**

THE NAME OF THE CORPORATION SHALL BE:

CM ROCK CORP

**ARTICLE II    PRINCIPAL OFFICE**

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address  
100 WALL ST, 10th Fl  
New York, NY 10005  
\_\_\_\_\_

Mailing Address  
100 WALL ST, 10th Fl  
New York, NY 10005  
\_\_\_\_\_

**ARTICLE III    PURPOSE**

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:  
Any lawful business.  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE IV    SHARES**

THE NUMBER OF SHARES OF STOCK IS: 1500

**ARTICLE VI    REGISTERED AGENT AND STREET ADDRESS**

THE **NAME AND FLORIDA STREET ADDRESS** (P.O. BOX **NOT** ACCEPTABLE) OF THE REGISTERED AGENT IS:

Yos Gainza  
488 NE 18TH ST #415  
MIAMI FL 33132  
\_\_\_\_\_

HAVING BEEN NAMED AS REGISTERED AGENT AND 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.

Yos Gainza  
Signature/Registered Agent

02/04/2022  
Date

**ARTICLE V DIRECTORS AND/ OR OFFICERS**

*THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:*

Name & Title: YOS GAINZA, President

Address: 488 NE 18TH ST #415  
MIAMI FL 33132

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

**I submit this document and affirm that the facts stated herein are true. I am aware that 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.**

\_\_\_\_\_  
Signature/Authorized Person

02/04/2022

\_\_\_\_\_  
Date