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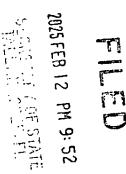
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COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJI	ECT: MAREIN INC.			
		f corporation	- must include suffix	
Dear Si	ir or Madam:			
"Certifi	closed "Application by Foreign Cor icate of Existence," or "Certificate of eferenced foreign corporation to tra	of Good Stan	ding" and check are submitte	usiness in Florida," ed to register the
Please	return all correspondence concernin	g this matter	to the following:	
CLAUI	DIA E. RACHADELL			
		Name of	Person	
MARE	IN INC.			
	· · · · · · · · · · · · · · · · · · ·	Firm/Com	pany	
2250 N	W 114TH AVE UNIT 1M - MEX 3101	0		
		Addre	:SS	
MIAMI	, FL 33192			
		City/State a	nd Zip code	
claudia	@marein.io			
	E-mail address:	(to be used f	or future annual report notifi	cation)
For furt	ther information concerning this ma	tter, please o	all:	
HEINR	ICH F. TERBORG	786	591-7911	
	Name of Person	Area Cod	Daytime Telephone	Number
	STREET/COURIER ADDRESS Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	:	MAILING ADDI Registration Section Division of Corpor P.O. Box 6327 Tallahassee, FL 33	on rations
Please n	ed is a check for the following amounake check payable to: FLORIDA DE 00 Filing Fee	PARTMENT Fee &	• · · · · · · · · · · · · · · · · · · ·	\$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

(Date of incorporation) (Date of duration, if other than perpetual) No business has been transacted in Florida so far. (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 250 NW 114th Ave Unit IM Mex 31010 (Principal office street address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporate Creations Network Inc. 2025	MARHEIN OR	SOLAR180		
(State of country under the law of which it is incorporated) (PEI number, if applicable) (Polte of incorporation) (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 250 NW 114th Ave Unit IM Mex 31010 (Principal office street address) Same (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporate Creations Network Inc. Solution Highway 1 North Palm Beach (City) (City) (City) (Date of duration, if other than perpetual)	[If name unavail	able in Florida, enter alternate corporate name a	dopted for the purpose of transact	ing business in Florida
(State of country under the law of which it is incorporated) (PEI number, if applicable) (Polte of incorporation) (Date of duration, if other than perpetual) No business has been transacted in Florida so far. (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office street address) Same (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporate Creations Network Inc. Solution Highway I North Palm Beach (City) (City) (City) (Date of duration, if other than perpetual)	Delaware			
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No business has been transacted in Florida so far. (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 250 NW 114th Ave Unit IM Mex 31010		5.		
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 250 NW 114th Ave Unit IM Mex 31010 , Miemi , FL 33\92 (Principal office street address) Same (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporate Creations Network Inc. Solution			(Date of duration, if othe	r than perpetual)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 250 NW 114th Ave Unit IM Mex 31010 , Microi , FL 33\9.2 (Principal office street address) Same (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporate Creations Network Inc. 801 US Highway I North Palm Beach North Palm Beach (City)	No business has	s been transacted in Florida so far.		
(Principal office street address) Same (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporate Creations Network Inc.		(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150	Florida, if prior to registration) 22, F.S., to determine penalty liabi	lity)
(Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporate Creations Network Inc. Street	250 NW 114th			• •
(Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporate Creations Network Inc.		(Principal offic	e street address)	
Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporate Creations Network Inc.	ame			
Name: Corporate Creations Network Inc. 801 US Highway I North Palm Beach (City) (City) Name: State of the control of the				
Name: Corporate Creations Network Inc. 801 US Highway I North Palm Beach (City) Rocal State of the control		(Current mailing	address, if different)	
Name: Solid US Highway 1 Florida			,	
North Palm Beach (City) North Palm Beach (City) (Zip code)	Name and <u>stre</u>		,	
North Palm Beach , Florida 33408 (City) , Florida (Zip code)		et address of Florida registered agent: (P.O.	,	202
(City) (Zip code)	Name:	et address of Florida registered agent: (P.O. Corporate Creations Network Inc.	,	2025 FE
min 🛣	Name:	et address of Florida registered agent: (P.O. Corporate Creations Network Inc. 801 US Highway 1	Box <u>NOT</u> acceptable)	2025 FEB 11 S TALLAC
	Name:	et address of Florida registered agent: (P.O. Corporate Creations Network Inc. 801 US Highway I North Palm Beach	Box NOT acceptable) , Florida 33408	7
	Name: fice Address:	Corporate Creations Network Inc. 801 US Highway I North Palm Beach (City)	Box NOT acceptable) , Florida 33408	IZ PM
	Name: fice Address: Registered againg been name	et address of Florida registered agent: (P.O. Corporate Creations Network Inc. 801 US Highway I North Palm Beach (City) ent's acceptance: sed as registered agent and to accept service	Box NOT acceptable) , Florida 33408 (Zip code) e of process for the above state	2 PM 9:
ignated in this application, I hereby accept the appointment as registered agent and agree to acf in this ca ther agree to comply with the provisions of all statutes relative to the proper and complete performance of	Name: fice Address: Registered ag ving been nam ignated in this	et address of Florida registered agent: (P.O. Corporate Creations Network Inc. 801 US Highway I North Palm Beach (City) ent's acceptance: led as registered agent and to accept service application, I hereby accept the appointm	Box NOT acceptable) , Florida 33408 (Zip code) e of process for the above state ent as registered agent and ag	2 P 99 99 99 99 99 99 99 99 99 99 99 99 9
ther agree to comply with the provisions of all statutes relative to the proper and complete performance of	Name: fice Address: Registered ag ving been nam ignated in this ther agree to c	et address of Florida registered agent: (P.O. Corporate Creations Network Inc. 801 US Highway I North Palm Beach (City) ent's acceptance: red as registered agent and to accept service application, I hereby accept the appointm omply with the provisions of all statutes re	Box NOT acceptable) , Florida 33408, Florida (Zip code) e of process for the above state ent as registered agent and aglative to the proper and comple	2 P 99 99 99 99 99 99 99 99 99 99 99 99 9
ther agree to comply with the provisions of all statutes relative to the proper and complete performance of	Name: fice Address: Registered ag wing been nam signated in this ther agree to c	et address of Florida registered agent: (P.O. Corporate Creations Network Inc. 801 US Highway I North Palm Beach (City) ent's acceptance: red as registered agent and to accept service application, I hereby accept the appointm omply with the provisions of all statutes re	Box NOT acceptable) , Florida 33408, Florida (Zip code) e of process for the above state ent as registered agent and aglative to the proper and comple	2 P 99 99 99 99 99 99 99 99 99 99 99 99 9
ther agree to comply with the provisions of all statutes relative to the proper and complete performance of I am familiar with and accept the obligations of my position as registered agent.	Name: fice Address: Registered ag ving been nam ignated in this ther agree to c	et address of Florida registered agent: (P.O. Corporate Creations Network Inc. 801 US Highway I North Palm Beach (City) ent's acceptance: red as registered agent and to accept service rapplication, I hereby accept the appointm omply with the provisions of all statutes re r with and accept the obligations of my pos	Box NOT acceptable) , Florida 33408, Cip code) e of process for the above stateent as registered agent and aglative to the proper and complition as registered agent.	2 P 99 99 99 99 99 99 99 99 99 99 99 99 9
signated in this application, I hereby accept the appointment as registered agent and agree to act in this carther agree to comply with the provisions of all statutes relative to the proper and complete performance of all am familiar with and accept the obligations of my position as registered agent. Katinna Salazar Special Secretary (Registered agent's signature)	Name: ffice Address: Registered ag aving been nam signated in this rther agree to c	et address of Florida registered agent: (P.O. Corporate Creations Network Inc. 801 US Highway I North Palm Beach (City) ent's acceptance: aed as registered agent and to accept service application, I hereby accept the appointm omply with the provisions of all statutes rewith and accept the obligations of my pos	Box NOT acceptable) , Florida 33408 (Zip code) e of process for the above state ent as registered agent and ag lative to the proper and complition as registered agent.	ed corporation arthoree to act in this cap

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

CR

A. DIRECTORS			
□Chairman	Name: Heinrich Terborg	□ Chairman	Name: Marcos Ripoll
□Vice Chairman	Address:	□Vice Chairman	Address: Solon 210 Int 502
Director	Alcaldia Iztapalapa	■Director	Col Polanco II Seccion
□President	Mexico City, Mexico 09400	□President	Alcaldia Miguel Hidalgo
□Vice President		□Vice President	Mexico City, Mexico 11530
■ Secretary	□Treasurer	☐ Secretary	■ Treasurer
Other CEO	Other	■Other	Other
□Chairman □Vice Chairman □Director	Name: Claudia Rachadell Address: 2250 NW 114th Ave Unit 1M Mex 31010	□Chairman □Vice Chairman □Director	Name:
President	Miami, FL 33192	□President	
□Vice President		□Vice President	
Secretary	□Treasurer	Secretary	Treasurer
■Other	Other	□Other	Other
□Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director		□Director	
□President		□President	
□Vice President		□Vice President	
☐ Secretary	☐Treasurer	☐ Secretary	Treasurer
Other	Other	□Other	Other
The officer or direct she is aware that fas.817.155, F.S.	Signature of Director or ctor signing this document (and who is listed in number alse information submitted in a document to the Departm	of State Annual Re Officer 11 above) affirms the	at the facts stated herein are true and that he or
13. Claudia Rac	hadell - President of Marein Inc.		

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "MAREIN INC." IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTIETH DAY OF SEPTEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MAREIN INC." WAS INCORPORATED ON THE FIFTEENTH DAY OF SEPTEMBER, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

Authentication: 204440068

Date: 09-20-24

7036236 8300 SR# 20243739411

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: MAREIN INC.	
Name of corporation -	must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Au "Certificate of Existence," or "Certificate of Good Standin above referenced foreign corporation to transact business	ng" and check are submitted to register the
Please return all correspondence concerning this matter to	the following:
CLAUDIA E. RACHADELL	
Name of Pe	rson
MAREIN INC.	
Firm/Compa	nny
2250 NW 114TH AVE UNIT IM - MEX 31010	
Address	
MIAMI, FL 33192	
City/State and	Zip code
claudia@marein.io	
E-mail address: (to be used for	future annual report notification)
For further information concerning this matter, please call	l:
HEINRICH F. TERBORG 786	591-7911
Name of Person Area Code	Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
_	F STATE 578.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

MARHEIN OR	SOLAR180		
(If name unavail	able in Florida, enter alternate corporate name ad	opted for the purpose of transacti	ng business in Florida)
Delaware	3	036236	
09/15/2022	ry under the law of which it is incorporated)	(FEI number, if a	
(Date	of incorporation)	(Date of duration, if other	than perpetual)
No business has	been transacted in Florida so far.		
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150)	lorida, if prior to registration) 2, F.S., to determine penalty liabi	lity)
2250 NW 114th .	Ave Unit 1M Mex 31010		
Same	(Principal office	street address)	
	(Current mailing	address, if different)	
Name:	et address of Florida registered agent: (P.O. Corporate Creations Network Inc. 801 US Highway 1	Box <u>NOT</u> acceptable)	202 SE: T.
Name:	Corporate Creations Network Inc.		2025 FEB
Name:	Corporate Creations Network Inc. 801 US Highway 1	-	2025 FEB 12 SEGILLARIA
Name: Office Address: Registered aglaving been namesignated in this	Corporate Creations Network Inc. 801 US Highway 1 North Palm Beach	Florida 33408 Zip code) of process for the above state nt as registered agent and agr	ree to act in this capacil
Name: Office Address: Registered ag Having been nam lesignated in this urther agree to c	Corporate Creations Network Inc. 801 US Highway 1 North Palm Beach (City) ent's acceptance: ned as registered agent and to accept service application, I hereby accept the appointme omply with the provisions of all statutes rela	Florida 33408 Florida (Zip code) of process for the above state nt as registered agent and agn tive to the proper and comple ion as registered agent.	ad corporation at the place to act in this capacit

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

OR

A. DIRECTORS			
□Chairman	Name: Heinrich Terborg	□ Chairman	Name: Marcos Ripoli
□Vice Chairman	Address: Calculistas 37 Col El Sifon	□Vice Chairman	Address: Solon 210 Int 502
Director	Alcaldia Iztapalapa	Director	Cot Polanco II Seccion
□President	Mexico City, Mexico 09400	□President	Alcaldia Miguel Hidalgo
□Vice President		□Vice President	Mexico City. Mexico 11530
■ Secretary	□Treasurer	□Secretary	Treasurer
Other CEO	Other	■Other	Other
□Chairman □Vice Chairman	Name: Claudia Rachadell Name: 2250 NW 114th Ave Unit 1M Address: 2250 NW 114th Ave Unit 1M	□Chairman □Vice Chairman	Name:Address:
□Director	Mex 31010	Director	
■ President	Miami, FL 33192	□President	
□Vice President		□Vice President	
□Secretary	□Treasurer	□Secretary	□Treasurer
■Other		□Other	Other
□Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:		Address:
□Director		□Director	
□President		□President	
□Vice President		□Vice President	
□Secretary	□Treasurer	Secretary	□Treasurer
□Other	Other	Other	Other
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 12. Signature of Director or Officer			
The officer or direct she is aware that fa s.817.155, F.S.	ctor signing this document (and who is listed in number lse information submitted in a document to the Departn	11 above) affirms that ment of State constitut	at the facts stated herein are true and that he or tes a third degree felony as provided for in
13. Claudia Rac	hadell - President of Marein Inc.		

(Typed or printed name and capacity of person signing application)

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "MAREIN INC." IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTIETH DAY OF SEPTEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MAREIN INC." WAS INCORPORATED ON THE FIFTEENTH DAY OF SEPTEMBER, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

Authentication: 204440068

Date: 09-20-24

7036236 8300 SR# 20243739411