HEALTH FINANCING AGREEMENT

BORROWER: Julia Miller, residing at 123 Flower Street - New York, NY, holder of SSN nº 232854048.

LENDER: FINANCIAL BANK OF AMERICA Inc., registered under EIN nº 00-0000000,

headquartered at 1000 Main Avenue, New York, NY. **FINANCED AMOUNT:** \$42,751.00.

CLAUSE ONE – PURPOSE: This agreement aims to grant financing to the BORROWER for the acquisition of the asset described in the preamble.

CLAUSE TWO – TERM: The financing period shall be up to 60 months, unless otherwise agreed upon by the parties.

CLAUSE THREE – PAYMENT: The BORROWER shall pay monthly installments, increased by interest of 1.2% per month and corrected annually by the Consumer Price Index (CPI).

CLAUSE FOUR – GUARANTEES: The financed asset will remain under fiduciary lien in favor of the BANK until full settlement.

CLAUSE FIVE – INSURANCE: The BORROWER must contract mandatory insurance for the financed asset, with minimum coverage as required by current legislation.

CLAUSE SIX – DEFAULT: Payment delay will result in a penalty of 2% on the installment, late interest of 1% per month, and possible execution of the guarantee.

CLAUSE SEVEN – TERMINATION: Breach of obligations will result in termination of the agreement and enforcement of the guarantees, regardless of notification.

CLAUSE EIGHT – JURISDICTION: The parties elect the Courts of New York, NY, to settle any disputes arising from this agreement.

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New York, January 20, 2024	
Julia Miller – BORROWER	
Representative – FINANCIAL E	 BANK OF AMERICA (LENDER)