

**Company Name**

Certified Translation

**City**

New York

**State**

NY

**Contact Name (First and Last)**

A. Hoffmann

**Email**

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**Phone**

(917) 793-0461

**Website**

<https://www.certified-translation.us/>

**Do you have a UF Supplier ID?**

No

**Is the owner a UF alum?**

No