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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LEGALZOOM.COM INC.

Account Number : 120010000062 Phone : (323)962-8600

Fax Number : (323)962-3889

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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## FLORIDA PROFIT/NON PROFIT CORPORATION

Create A Smile Uganda, Inc.

Certificate of Status	0
Certified Copy	11
Page Count	04
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T. SCOTT

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To:

## **COVER LETTER**

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

UBJECT:	(PROPOSED CORP	ORATE NAME – <u>MUST IN</u>	CLUDE SUFFIX)
nclosed is an original a	and one (1) copy of the Ar	ticles of Incorporation and	a check for:
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	■\$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certified Copy & Certificate
		ADDITIONAL COPY RI	

Name (Printed or typed)

101 N Brand Blvd.. 11th Ffr.

Address

Glendale, CA 91203

City. State & Zip

323 962-8600 ext. 9724

Daytime Telephone number

ramanagement@ilegalzoom.com

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

NOTE: Please provide the original and one copy of the articles.

## ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I The name of the	NAME ne corporation shall be: Create A Smile Uga	nda, Inc.			
ARTICLE II	PRINCIPAL OFFICE				
370	Principal <u>street</u> address: Saint Regis Drive., Merritt Island, Florida 3	12953	Mailing address, if different is:		
The purpose f	I PURPOSE  For which the corporation is organized is:  aid to developing regions within Uganda are		ida utilizes donations and partnerships (	to provide	
	MANNER OF ELECTION The main		The r	nethod b	
	directors of the corporation are e	lected or appo		iws.	·
Name and Tit	le: Amanda E Morey (P,D)	Name and Title	Heather Marderosian (T.D)		
Address	370 Saint Regis Drive., Merritt Island	Address:	370 Saint Regis Drive Merritt Island	<u> </u>	
Address	Florida 32953	_	Florida 32953	_	
Name and Tit	Janine Runion (S)	<ul><li>Name and Title</li></ul>	Kazarwa Sezi (D)	<del></del>	
Address	370 Saint Regis Drive., Merritt Island	Address:	370 Saint Regis Drive., Merritt Island	<u>!</u>	
Florida 32953	Florida 32953	_	Florida 32953	_	
Name and Tit	le:	— Name and Title	DIVISIO	188 3.16 VA 188 3.16 VA 188 3.16 VA	71
Address	370 Saint Regis Drive., Merritt Island	Address:	HAS	### <b>Z</b> Ay: <b>Z</b> E::	
	Florida 32953	·	TO CO		gradjedg
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2022-06-22 05:49:43 PDT

LegalZoom.com, Inc.

From: Kayla Bu

Name and Title:_		Name and Title:		
Address		Address:		
_				
Name and Title:		Name and Title:		
Address		Address.		
_				
	REGISTERED AGENT	11.5 64		
The <u>name and Flo</u>	orida street address (P.O. Box NOT accept	able) of the registered	agent is:	
Name:	United States Corporation Agents, Inc.			
Address:	5575 S. Semoran Blvd. Suite 36			
	Orlando, FL 32822			
		<del></del>		
APTICLE VII	INCORPORATOR			
	dress of the Incorporator is:			
Name:	Cheyenne Moseley, Legalzoom.com, Ir	ac.		
MATHE.	101 N. Brand Blvd, 11th Floor			
Address:				
	Glendale, CA 91203			
ARTICLE VIII	EFFECTIVE DATE:			
Effective date, if o	other than the date of filing:		(OPTIONAL)	. ak. amer N
(ii an ellective ti	ate is listed, the date must be specific and	i cannot de more tha	n tive days prior or 90 days after	tne Hiling.)
	inserted in this block does not meet the appive date on the Department of State's reco		g requirements, this date will not be	: listed as the
		_		
	ned as registered agent to accept service of the initial with and accept the appointment as			designated in the
/	$\sim m$			
	Required Signature of Registered A		6/22/2022	
Cheyenne Mosel	ey, United States Corporation Agents, Inc.		Date	
	ment and affirm that the facts stated herein State constitutes a third degree felony as p			l in a document i
	m	-	6/22/2022	
<del></del>	Required Signature of Incorp	orator	Date	
Cheyenne Mo	oseley, Asst. Secretary, Legalzon		·AIL	