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APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

North Carolin			for the purpose of transacting bus	iness in Flo	orida)
	a	2			
(State or cou	arry under the law of which it is incor	rporated)	(FEI number, if applicable)	_	
12/2/2019		5			
(I.	Date of Incorporation)	· ·	(Date of duration, if other than	perpetual)	
(Date first cond	ucted affairs in Florida if prior to regist	ration. See sections 6	17.1501 & 617.1502, F.S. to deter	mine penalt	y liability.)
52 Club House	Drive #108, Palm Coast, FL 32137 (Pri				
	(Pri	ncipal office street	address)		
	(Currer	nt mailing address, i	l different)		
Charitable, Ed	acational. Scientific				2
(Purpose(s) of	ucational, Scientific corporation authorized in home state (or country to be carr	ied out in the state of Florida)		124
					aug
	eet address of Florida registered a				1 =
					TILED - I AN S
	Christopher Silva 52 Club House Drive #108 Palm Coast (City)				-1 AN 9: 15

11. 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.

12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTOR Chairman	Christopher Silva Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman		
□Director	Palm Coast, FL 32137	□Director		
□President		□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:
☐ 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:
Non-indexed indiv	it Notice: Use an attachment to report more the viduals may be added to the index when filing (Signature of Chairman, Vice Chairman, or a	your Florida Department o	of State Annu	al Report form.
14. Chairman	(Typed or printed name and capacity	of person signing applicat	ion)	



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

CLEANUP PROJECT, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 2nd day of December, 2019, with its period of duration being Perpetual.

I FURTHER certify that the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Nonprofit Corporation Act; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 1st day of August, 2024.

Elaine I Marshall

Secretary of State