# N150000006

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### **COVER LETTER**

TO: Amendment Section

· Division of Corporations		
NAME OF CORPORATION: One/Uno	Corp	
DOCUMENT NUMBER: N1500000	681	
The enclosed Articles of Amendment and fee are subm	nitted for filing.	
Please return all correspondence concerning this matter	to the following:	
Yohan Moore		
	Name of Contact Persor	1)
One/Uno Corp		
	(Firm/ Company)	
17812 72nd Road North	า	
7777	(Address)	
Loxahatchee, Florida33	470	
	City/ State and Zip Code	<del>e</del> )
unoonecorp@hot		
E-mail address: (to be used	•	notification)
For further information concerning this matter, please of	call:	
Yohana Moore	<sub>at</sub> 954	de & Daytime Telephone Number)
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pay	able to the Florida Depa	rtment of State:
□ \$35 Filing Fee	3\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

SECRETARY OF STATE EIVISION OF CORPORATIONS
15 FEB 19 AM 8: 56

#### **AMENDED AND RESTATED**

**Articles of Corporation** 

N1500000681

## Uno/One Corp (formerly known as One/Uno Corp)

These amended and restated articles of incorporation, which did not require member approval pursuant of Article IV of the Corporation's original Articles of Incorporation and Florida Law, were approved by a majority of the Board of Directors on February 12, 2015.

#### **ARTICLE I. NAME**

The name of this corporation is Uno/One Corp.

#### **ARTICLE II. PRINCIPAL OFFICE**

The principal address of the corporation is to be: 17812 72<sup>nd</sup> Road North, Loxahatchee, Florida 33470.

#### **ARTICLE III. PURPOSE**

The corporation is organized exclusively for charitable and educational purposes as specified under Section 501©3 Internal Revenue Code, including for such purposes, the making of distributions to organizations that qualify as an exempt stated under the Section 501©(3) of the Internal Revenue Code. The purpose of this corporation shall be as follows:

- To coordinate services of volunteers that includes a variety of medical personnel to assist in surgical needs in global rural communities.
- To Identify, evaluate and diagnose diseases that will benefit from surgical intervention.
- Provide local medical personnel with ongoing education that will improve knowledge, techniques and better access to healthcare.
- Optimize preventative care that will reduce diseases and increase life expectancy.

#### **ARTICLE IV. MANNER OF ELECTION**

This corporation shall have members. Each member's eligibility, rights and obligations will be carried out according to the corporations bylaws. As stated in Article III under the Section 501@(3) Internal Revenue Code, the purpose of the corporation shall be administered by the board members. In no such matter will the members have any right or gain interest in any part of this corporation.

#### **ARTICLE V. BOARD OF DIRECTORS**

Yohana Moore, 17812 72<sup>nd</sup> Road North, Loxahatchee, Florida 33470
Fahim Habib M.D., 1450 Brickell Bay Drive, Apt 704, Miami, Florida 33131
Ana Cecilia Garcia de Palomo, 4ta Avenida 27-83 Zona 12 Guatemala City, Guatemala

#### **ARTICLE VI. REGISTERED AGENT**

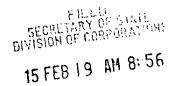
Yohana Moore, serving as registered agent, will be utilizing the following address

For the corporation:

17812 72<sup>nd</sup> Road North, Loxahatchee, Florida 33470.

#### **ARTICLE VII. INCORPORATOR**

The incorporator is as follows:
Fahim Habib M.D.
1450 Brickell Bay Drive, Apt 704, Miami, Florida 33131



Having been named as registered agent to accept of process for the above stated corporation at the place of designated in this certificate, I am familiar with and accept appointment as a registered agent and agree to act in this capacity

Munalum	2/12/2015
Required signature of Registered Agent.	Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S

Required signature of incorporator. Date

The date of each amendment(s) adoption:		•	*OEX 100, 201/100	SECAL TAX OF SHATEWIF other than the	
Eff	ective date <u>if applicable</u> :	2/12/2015	er amendment file date 15 FEB 19 AM 8: 56		
Ado	option of Amendment(s)	(CHECK ONE)	anenament file autofig.		
	The amendment(s) was/w was/were sufficient for ap		umber of votes cast for the amendment(s)		
	There are no members or adopted by the board of o	members entitled to vote on the amend lirectors.	ment(s). The amendment(s) was/were		
	Signature(By the	ot been selected, by an incorporator - i	rd, president or other officer-if directors if in the hands of a receiver, trustee, or		
		ourt appointed fiduciary by that fiducianal Moore	ary)		
	secreta	<del></del>	<u> </u>		
		(Title of person signin	ıg)		