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(Address)				
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(Business Entity Name)				
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J. FASON OCT 29 2020



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COVER LETTER

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

SUBJECT:	Leave on the Light Inc
	(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Art	ticles of Incorporation and a check for:
-----------------------------------------------------	------------------------------------------

\$70.00 Filling Fee	\$78.75 Filing Fee & Certificate of Status	■\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee. Certified Copy & Certificate	
		ADDITIONAL COPY REQUIRED		

FROM:	Name (Printed or typed)				
TROM.					
	PO Box 993				
	Address				
	Verdi. NV 89439				
	City, State & Zip				
	303-306-4669				
	Daytime Telephone number				
	brettl@whatsthefuture.us				
I	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	NAME the corporation shall be: Leave on the Light In	ie				
<u>ARTICLE I</u>						
12-	Principal <u>street</u> address: Mickler Blvd	69	Mailing address, if differently Nubian Ln.	ent is:		
St.	Augustine, FL 32080	Au	stin TX 78739			
The purpose	tor which the corporation is organized is: Leathrough entertainment. We help people fight ages.					
Please see a	ttachment.					
		····	ectors are elected and appointed:	Accordi	ing to I	pylaws.
4 <i>RTICLE V</i>	INITIAL OFFICERS AND/OR DIRECTO	<u>ORS</u>		Accordi	ing to l	bylaws.
ARTICLE V		<u>ORS</u>		Accordi	ing to I	bylaws.
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTO tle: Marlon Henderson President & Director	ORS Name and Title	: Robbie Theissen Director	Accordi	21	bylaws.
ARTICLE V Name and Ti Address	tle: Marlon Henderson President & Director 124 Mickler Blvd St. Augustine, FL 32080	ORS Name and Title	Robbie Theissen Director 124 Mickler Blvd St. Augustine, FL 32080	Accordi		bylaws.
ARTICLE V Name and Ti Address Name and Ti	tle: Marlon Henderson President & Director 124 Mickler Blvd St. Augustine, FL 32080	ORS Name and Title Address:	Robbie Theissen Director 124 Mickler Blvd St. Augustine, FL 32080	Accordi	21	bylaws.
ARTICLE V Name and Ti Address Name and Ti	tle: Marlon Henderson President & Director 124 Mickler Blvd St. Augustine, FL 32080 James Dauterive Treasurer & Director	ORS Name and Title Address: Name and Title	Robbie Theissen Director 124 Mickler Blvd St. Augustine, FL 32080 Brett Lindstrom Director	Accordi	21	bylaws.
ARTICLE V Name and Ti Address Name and Ti	tle: Marlon Henderson President & Director 124 Mickler Blvd St. Augustine, FL 32080 James Dauterive Treasurer & Director 124 Mickler Blvd St. Augustine, FL 32080 St. Augustine, FL 32080	ORS Name and Title Address: Name and Title Address: Address:	Robbie Theissen Director 124 Mickler Blvd St. Augustine, FL 32080 Brett Lindstrom Director 124 Mickler Blvd St. Augustine, FL 32080	20 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	2020 OCT 14 PM 4:3	nylaws.
ARTICLE II ARTICLE II ARTICLE II Name and Ti Address Name and Ti Address	tle: Marlon Henderson President & Director 124 Mickler Blvd St. Augustine, FL 32080 James Dauterive Treasurer & Director 124 Mickler Blvd St. Augustine, FL 32080 St. Augustine, FL 32080	ORS Name and Title Address: Name and Title Address: Address:	Robbie Theissen Director 124 Mickler Blvd St. Augustine, FL 32080 Brett Lindstrom Director 124 Mickler Blvd	20 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	2020 OCT 14 PM 4:3	nylaws.

Name and Title:_	}	Name and Title:	
Address	<u> </u>	Address:	
		**	
		-1	
Name and Title:_		Name and Title:	
Address		Address:	
_			
_			<u> </u>
. 0.00.231 - 1.0			
	<u>REGIȘTERED AGENT</u> prida street address (P.O. Box NO T accepta	able) of the registered agent is:	
Name:	Marlon Henderson		
Address:	124 Mickler Blvd		
	St. Augustine, FL 32080		
	INCORPORATOR dress of the Incorporator is:		
Name:	Kate Rahmeyer		
Address:	PO Box 993		
	Verdi NV 89439		
	EFFECTIVE DATE:		
Effective date, if c (If an effective date)	other than the date of filing: ate is listed, the date must be specific and	. (OPTIONAL) cannot be more than five days prior	or 90 days after the filing.)
	inserted in this block does not meet the applive date on the Department of State's record		is date will not be listed as the
	ned as registered agent to accept service of amiliar with and accept the appointment as	registered agent and agree to act in this	
Mu	Required Signature of Registered A		10/09/2020
•	Required Signature of Registered A	gent	Date
	ment and affirm that the facts stated herein of State constitutes a third degree felony as		formation submitted in a documen
(\$	(P)		10/09/2020
	Required Signature of Incorpo	rator	Date

Addendum, to Articles of Incorporation

Purpose Clause:

This organization is organized exclusively for charitable, educational, religious and/or scientific purposes under Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, and shall not inure benefit or earnings to any private shareholder or individual.

Dissolution Clause:

Upon the winding up and dissolution of this organization, after paying or adequately providing for the debts and obligations of the organization, the remaining assets shall be distributed to a nonprofit fund, foundation or corporation which is organized and operated exclusively for one or more exempt purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, including to another tax-exempt organization under Section 501(c)(3), or shall be distributed to the federal government, or to a state or local government, for a public purpose.

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