

Florida Department of State
Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
FUNDUNIFE INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
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Electronic Filing Menu

Corporate Filing Menu

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

ARTICLE I NAMEThe name of the corporation shall be: FUNDUNIFE INC.**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

7370 ESTEPONA AVE

Mailing address, if different is:

DORAL FL 33178**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Our goal is to create and implement training programs and projects for the benefit of families with the special need and thereby improve their quality of life. Efficiency, Solidarity, unity and Loyalty is our motto.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointedBy the ByLaws**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title:	<u>MELODY J. THEN</u>	Name and Title:	<u>LUIS E REYES</u>
Address:	<u>PRESIDENT</u>	Address:	<u>TREASURE</u>
	<u>3770 ESTEPONA AVE</u>		<u>3514 ESTEPONA AVE</u>
	<u>DORAL FL 33178</u>		<u>DORAL FL 33178</u>
Name and Title:	<u>CARLOS SANCHEZ</u>	Name and Title:	<u>MICHAEL THEN</u>
Address:	<u>VICE PRESIDENT</u>	Address:	<u>MEMBER</u>
	<u>8373 LAKE DR APT 303</u>		<u>3770 ESTEPONA AVE</u>
	<u>MIAMI FL 33166</u>		<u>DORAL FL 33178</u>
Name and Title:	<u>RAFAEL A. HERNANDEZ</u>	Name and Title:	<u>SHARITZA DEL ORBE BORGES</u>
Address:	<u>SECRETARY</u>	Address:	<u>MEMBER</u>
	<u>993 SW 8 PL</u>		<u>8373 LAKE DR APT 303</u>
	<u>FLORIDA CITY 33034</u>		<u>DORAL FL 33166</u>

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FUNDUNIFE INC.
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C.D.

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

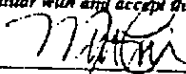
Name: MELODY J.THEN
Address: 3770 ESTEPONA AVE
DORAL FL 33178

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MELODY J.THEN
Address: 3770 ESTEPONA AVE
DORAL FL 33178

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



Required Signature of Registered Agent

3/30/2022

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

3/30/2022

Date

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