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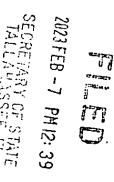
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COVER LETTER

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

SUBJECT: Fund the Fut	ure Find the Cure, Inc. (PROPOSED CORPO	ORATE NAME – <u>MUST IN</u>	CLUDE SUFFIX)
Enclosed is an original a \$70.00 Filing Fee	and one (1) copy of the Art \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee,
	Status	ADDITIONAL CO	
FROM:	Erica H. Sterling, Esq.	ne (Printed or typed)	_
	500 Fleming St	Address	-
	Key West, FL 33040	City, State & Zip	_
	3052949556	me Telephone number	SECR TAL
	Dayiii	me rerephone number	رت)

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

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

erica@spottswoodlaw.com

ARTICLES OF INCORPORATION

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

1422 5				
	Principal <u>street</u> address: 1422 South Street		Mailing address, if different is:	
Key V	/est, FL 33040			
	which the corporation is organized			
	ourposes within the meaning of Section and the Company of the Comp			
- 	ture of this Corporation shall be to t	aise and contribute fund:	s to other quaithed, 501(c)3,	. Charitable of educational
ganizations for	r cancer awareness and cure.			
				cat forth in the hydron
				Set forth in the dylaw
ARTICLE IV	MANNER OF ELECTION The	e manner in which the din	ectors are elected and appoint	ted:
ARTICLE IV	MANNER OF ELECTION The	e manner in which the dir	ectors are elected and appoint	ted:
ARTICLE IV	INITIAL OFFICERS AND/OR D		ectors are elected and appoint	ted:
IRTICLE V	INITIAL OFFICERS AND/OR D	<u>IRECTORS</u>	Randy Moore, Director	ted:
I <i>RTICLE V</i> Name and Title		IRECTORS Name and Title	Randy Moore, Director	ted:
RTICLE V	INITIAL OFFICERS AND/OR D Suzanne Moore, Director	<u>IRECTORS</u>	Randy Moore, Director	ted:
Name and Title	Suzanne Moore, Director 1422 South St Key West, FL 33040	Name and Title Address:	Randy Moore, Director 1422 South St Key West, FL 33040	
RTICLE V Name and Title Address	Suzanne Moore, Director 1422 South St Key West, FL 33040 Jackson Moore, Director	IRECTORS Name and Title Address: Name and Title	Randy Moore, Director 1422 South St	
Name and Title Name and Title	Suzanne Moore, Director 1422 South St Key West, FL 33040 Jackson Moore, Director	Name and Title Address:	Randy Moore, Director 1422 South St Key West, FL 33040	Z023 FEB Z023 FEB SECKET TALLA
IRTICLE V	Suzanne Moore, Director 1422 South St Key West, FL 33040 Jackson Moore, Director 1422 South St	IRECTORS Name and Title Address: Name and Title	Randy Moore, Director 1422 South St Key West, FL 33040	2023 FEB - 7 SECKETARY TALLA IAS
Name and Title Address Name and Title	Suzanne Moore, Director 1422 South St Key West, FL 33040 Jackson Moore, Director 1422 South St	Name and Title Address: Name and Title Address: Address: Address:	Randy Moore, Director 1422 South St Key West, FL 33040	2023 FEB - 7 SECKET I R

Name and Title	e: <u>' · </u>	Name and Title:	•
Address		Address:	
Name and Title	e:	Name and Title:	· · · · · · · · · · · · · · · · · · ·
Address		Address:	
			
ARTICLE VI	REGISTERED AGENT Florida street address (P.O. Box NOT a	accontable) of the registered agent is:	
Name:	Erica H. Sterling, Esq.	acceptable) of the registered agent is.	
Address:	500 Fleming St		
	Key West, FL 33040		
	INCORPORATOR address of the Incorporator is:		2023 F SECRI
Name:	Suzanne Moore		FEB -7 RETARY
Address:	1422 South St		B-7 PM PARY OF STARRASSEE
	Key West, Florida 33040		PN 12: 39 OF STATE
ARTICLE VII	I EFFECTIVE DATE:		<i>m</i> 9
Effective date,	if other than the date of filing:e date is listed, the date must be specif		
Note: If the da	ate inserted in this block does not meet to ective date on the Department of State's	he applicable statutory filing requireme	•
Having been n certificate Fan	named as registered agent to accept ser n familiar with and accept the appointmo 	vice of process for the above stated co ent as registered agent and agree to act	orporation at the place designated in this in this capacity
	Required Signature of Regist	ered Agent	2-2-23 Date
I submit this do the Departmen		herein are true. I am aware that any fal.	se information submitted in a document to
(Swave Na	28-	2-7-23
	Required Signature of I	ncorporator	<u>2-2-25</u> Date

State of Florida Department of State

I certify from the records of this office that GHI RENOVATIONS INC. is a New York corporation authorized to transact business in the State of Florida, qualified on July 28, 2020.

The document number of this corporation is F20000003468.

I further certify that said corporation has paid all fees due this office through December 31, 2023, that its most recent annual report/uniform business report was filed on February 23, 2023, and that its status is active.

I further certify that said corporation has not filed a Certificate of Withdrawal.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Twenty-third day of February, 2023

Secretary of State

Tracking Number: 5090551555CC

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication

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