711000084664

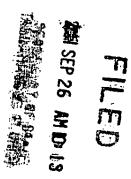
(Requestor's Name)			
(Address)			
(Address)			
((danoos)			
(City)Chata (7) ix (Dhana 40)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



700212516277

87.50 *87.50





COVER LETTER

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

SUBJECT: Renew You Cancertology, Inc			
(PROPOSED CORPORA	TE NAME – MUST INC	LUDE SUFFEX)	
Enclosed are an original and one (1) copy of the artificate of Status	\$78.75 Filing Fee & Certified Copy	d a check for: \$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED	
FROM: Susan Wolf	e (Printed or typed)		Ma SEP 26
7593 NW 60 Lane			2
Parkland, Florida 33067	Address		
City,	State & Zip		ō
954 815 9574			
Daytime T	elephone number		
swolfemua@aol.com E-mail address: (to be use	d for future annual renor	notification)	

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

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I ·	NAME Renew You Cance	ertology, Inc.
The name of the	corporation shall be:	
ADTICIJE II	PRINCIPAL OFFICE	
28/ 3 1 CM29 11	Principal street address	Mailing address, if different is:
	7593 NW 60 Lane	Training bost only it time the ar-
	Parkland Florida 33067	
	Earnard, 1 Milla Short	
RTICLE III		
the purpose for Thirs Corpo	which the corporation is organized is: ration is organized for the purpos smay be incorporated in der cor	e of transacting any or all lawful business for whice
oo.poranom	o may be morperated and on	
ADTICI D III	GUADPG	
The number of si	SHARES hares of stock is: 10,000	
ARTICLE V	INITIAL OFFICERS AND/OR DIRE	<u>sctors</u>
Name and	Title:Susan Wolf Director	Name and Title:
Address:	7593 NW 60 Lane	
	Parkland, Florida 33067	
		Name and Title:
Address:		Address:
Name and	Title:	Name and Title:
Address:		
	REGISTERED AGENT	
	Torida street address (P.O. Box NOT accep	table) of the registered agent is:
Name:	Susan Wolf	
Address:	7593 NW 60 Lane	
	Parkland, Florida 33067	
ARTICLE VII	INCORPORATOR	28
	ddress of the Incorporator is:	
Name:	Susan Wolf	——
Address:	7593 NW 60 Lane	
	Parkland, Florida 33067	
Having been na kis oeriGoeta I	med as registered agent to accept service of	f process for the above stated corporation at the flace designated at a registered agent and agree to act in this capacity
-	0	
(1	XIINBIA [1101]	9-21/11
	Pagaind Signature Designand Ag	Pote
~	Required Signature/Registered Ag	CALL SUSAN WOLF
submit this do	cument and affirm that the facts stated he	rein are true. I am aware that the false information submitted in
	Department of State constitutes a third degre	
	Suna interes	0.01.11
	Required Signature/Incorporate SUSA	<u> </u>
	Required Signature/Incorporate	Date Date