DO NOT WRITE ABOVE THIS LINE; RESERVED FCR ACC USE ONLY.

## ARTICLES OF INCORPORATION NONPROFIT CORPORATION

Read the Instructions C011i

1.		Y NAME – see ration:	Instructions CO	111 for naming r	equirements – 🤉	give the exact nan	ne of the
			nt Pla	net	185		<u> </u>
2.	to cor	nduct in Arizona		e character of af		the corporation in rporation ultimate	
	W fai	e offer milies l	progra	ams to	teach	Children	s and I hav
3.		BERS – check	one: 🔲 The	corporation WII	LL have membe	rs. COOK 1	utrious
4.	ART7	ONA KNOWN	PLACE OF BUS	INESS ADDRES	S•		
	4.1		known place of l		s the same as th	e <b>street address</b>	s of the
	4.2		ed " <b>No</b> " to number nown place of bu			reet address (no ona:	it a P.O.
				4.3.47			
		Attention (optional)					
,		Address 1				* *	
		Address 2 (optional)					
		City		000000000000000000000000000000000000000	State or	Zip	
		Country			Province		

<ol> <li>DIRECTORS - list the n corporation. If more sp. Attachment form C082.</li> </ol>	ame and lace is need	<b>business a</b> led, check t	<b>ddress</b> his box	of each and every [ and complete an	Dir d attach the	Director	
Terra Rose Go	inem					7	
Terra Rose Go Name 7757 E. Hermos	sa Vist	a Dr.	Name				
Address 1			Address 1				
Address 2 (optional) MeSa	MZ	85207	Address 2	(optional)			
Country USA	State or Province	Zip	City Country		State or Province	Zip	
Name			Name				
Address 1			Address 1				
Address 2 (optional)			Address 2	(optional)			
City	State or Province	Zip	City		State or Province	Zip	
Name			Name				
Address 1			Address 1				
Address 2 (optional)			Address 2	(optional)			
Country	State or Province	Zip	City Country		State or Province	Zip	
				•			

6. STATUTORY AGENT - see Instructions C011i							
an individual or an	re the <b>name</b> (can be entity) <b>and physical</b> (not a P.O. Box) in Arizona ent:	6.2	OPTIONAL - mail of statutory agent (c				
Statutory Agent Name (required)	Ganem						
7757 E. Hern	nosa Vista Dr.	Attention (option	nal)				
Address 1		Address 1					
Address 2 (optional) City Mesa	MZ 85207	Address 2 (optional)  City State Zip					
<b>6.3</b> REQUIRED - the <u>Statutory Agent Acceptance</u> form M002 must be submitted along with these Articles of Incorporation.							

7.	REQUIRED	- you	must	complete	and	submit	with	the	Articles	a	Certificate
	Disclosure.										

The Articles will be rejected if the Certificate of Disclosure is not simultaneously submitted.

8.	INCORPORATORS - list the name and address, and the signature, of each and every
	incorporator - minimum of one is required. If more space is needed, check this box
	and complete and attach the <u>Incorporator Attachment</u> form C084.

Terra Rose Ganem 7757 E. Hermosa Vista Dr	Name Address 1
Address 2 (optional)  MeSa	Address 2 (optional)  City State Zip
Country  SIGNATURE - see Instructions C011i;	Country  SIGNATURE - see Instructions C011i:
By checking the box marked "I accept" below, I acknowledge under penalty of law that this document together with any attachments is submitted in compliance with Arizona law.	By checking the box marked "I accept" below, I acknowledge <i>under penalty of law</i> that this document together with any attachments is submitted in compliance with Arizona law.
I ACCEPT	☐ I ACCEPT
Terra Rose Garem 11-21-19	Printed Name Date

Filing Fee: \$40.00 (regular processing)
Expedited processing – add \$35.00 to filing fee.
All fees are nonrefundable - see Instructions.

Mail: Arizona Corporation Commission

Corporate Filings Section

1300 W. Washington St., Phoenix, Arizona 85007

Fax: 602-542-4100

DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACC USE ONLY.

## **CERTIFICATE OF DISCLOSURE**

Read the Instructions C003i

1. ENTITY NAME – give the exact name of the corporation in Arizona:

7	Brilliant Planet				
2. FELON	NY/JUDGMENT QUESTIONS :				
1	any person (a) who is currently an officer, director, trustee, or incorpo	orator or (h	) who		
	ols or holds over ten per cent of the issued and outstanding common				
1	of any other proprietary, beneficial or membership interest in the cor		•		
2.1	Convicted of a felony involving a transaction in securities,		J		
	consumer fraud or antitrust in any state or federal jurisdiction within the five year period immediately preceding the signing of this certificate?	☐ Yes	<u></u>		
2.2	Convicted of a felony, the essential elements of which consisted of fraud, misrepresentation, theft by false pretenses or restraint of trade or monopoly in any state or federal jurisdiction within the five-year period immediately preceding the signing of this certificate?	☐ Yes	No		
2.3	Subject to an injunction, judgment, decree or permanent order of any state or federal court entered within the five-year period immediately preceding the signing of this certificate, involving any of the following:		_		
	<ul><li>a. The violation of fraud or registration provisions of the securities laws of that jurisdiction;</li><li>b. The violation of the consumer fraud laws of that jurisdiction;</li></ul>	☐ Yes	No		
	c. The violation of the antitrust or restraint of trade laws of that jurisdiction?				
2.4	If any of the answers to numbers 2.1, 2.2, or 2.3 are <b>YES</b> , you <b>MU</b> and attach a Certificate of Disclosure Felony/Judgment Attachment for		ie		
	and an action of the second of	000 11			
3. BANK	RUPTCY QUESTION:				
3.1	Has any person (a) who is currently an officer, director, trustee, incorporator, or (b) who controls or holds over twenty per cent of the issued and outstanding common shares or twenty per cent of any other proprietary, beneficial or membership interest in the corporation, served in any such capacity or held a twenty per	☐ Yes	Νο		
cent interest in <b>any other corporation</b> (not the one filing this Certificate) on the bankruptcy or receivership <b>of the other corporation</b> ?					
3.2	If the answer to number 3.1 is <b>YES</b> , you <b>MUST</b> complete and attach Disclosure Bankruptcy Attachment form C005.	n a Certificat	te of		

**IMPORTANT:** If within 60 days of the delivery of this Certificate to the A.C.C. any person no Certificate becomes an officer, director, trustee or person controlling or holding over ten per cent of the issued and outstanding shares or ten per cent of any other proprietary, beneficial or membership interest in the corporation, the corporation must submit a SUPPLEMENTAL Certificate providing information about that person, signed by all incorporators or by a duly elected and authorized officer.

SIGNATURE REQUIREMENTS:						77.	
Initial Certificate of Disclosure:	This Certificate must be complete and attach an				space is ne	eded,	
Foreign corporations:	signed by	a duly authoriz	ed officer or	r by the Cha	irman of		
Credit Unions and Loan Companies:	This Certificate must be	signed b	y any 2 officers	or directors			
City State		Address  Address  City	2		State	Zip	
Country 1 CC ST 1		Country					
SIGNATURE - see Instructions C003i:		SIGNATURE - see Instructions C003i:					
By typing or entering my name and che "I accept" below, I acknowledge under pathis document together with any attache compliance with Arizona law.	By typing or entering my name and checking the box marked "I accept" below, I acknowledge <i>under penalty of law</i> that this document together with any attachments is submitted in compliance with Arizona law.						
Signature Signature		Size		□ I A	CCEPT		
	Signa	ture					
Printed Name Rose Gaw	2m 11-21-19	Printe	d Name			Date	
REQUIRED – check only one:	REQU	IRED – check	only one:				
Incorporator - I am an incorporation submitting this Certification	Incorporator - I am an incorporator of the corporation submitting this Certificate.						
Officer - I am an officer of the submitting this Certificate	corporation	Officer - I am an officer of the corporation submitting this Certificate					
Chairman of the Board of Director Chairman of the Board of Director Submitting this Certificate.	Chairman of the Board of Directors - I am the Chairman of the Board of Directors of the corporation submitting this Certificate.						

Filing Fee: None	Mail:	Arizona Corporation Commission - Corporate Filings Section
		1300 W. Washington St., Phoenix, Arizona 85007
All fees are nonrefundable - see Instructions.	Fax:	602-542-4100

Please be advised that A.C.C. forms reflect only the **minimum** provisions required by statute. You should seek private legal counsel for those matters that may pertain to the individual needs of your business.

to the individual needs of your business.

All documents filed with the Arizona Corporation Commission are **public record** and are open for public inspection.

If you have questions after reading the Instructions, please call 602-542-3026 or (within Arizona only) 800-345-5819.

Director - I am a Director of the credit union or loan

company submitting this Certificate.

Director - I am a Director of the credit union or loan

company submitting this Certificate.