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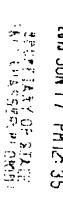
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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JUL 02 2019 M. SOLOMON

COVER LETTER

то:	_	tration Scion of Cor				
SUBJE	ECT:	Chasing I	Destiny Inc			
			Name of corpor	ation -	must include suffix	
Dear Si	гог М	adam:				
"Certifi	icate o	f Existenc	ion by Foreign Corporation e," or "Certificate of Good n corporation to transact by	Stand	ing" and check are sub	
Please i	return .	all corresp	ondence concerning this m	atter t	o the following:	
Cutler C	Jultry					
		-	Nam	c of Po	erson	
Chasing	g Destii	y Inc				
			Firm/	Comp	any	
7830 Co	ountry :	Run P k wy				
		-	A	ddres	S	
Orlando	o, FL 32	2818				
			City/St	ate and	l Zip code	
Kingdo	mex91	@gmail.co				
			E-mail address: (to be u	sed to	r tuture annual report r	iotification)
For furt	ther in:	formation	concerning this matter, ple	ase ca	11:	
Cutler (Jultry		at (<u>504</u>		, 1 27-1618	
		e of Perso	at (n	Code	Davtime Telepl	hone Number
	Regis Divisi Clifto 2661	tration Se on of Cor n Building	porations B Center Circle		MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations
Enclose	ed is a	check for	the following amount:			
□ \$70	.00 Fil	ing Fee	\$78.75 Filing Fee & Certificate of Status		\$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Chasing Destiny	· Ine			
	orporation; must include "INCORPORATED, orp." "Inc." "Co." or "Corp.")	"COMPANY," "CORPORATION,"		
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transacting t	ousiness in Florida)	
Louisiana		(FEI number, if applicable)		
(State or countr	y under the law of which it is incorporated)			
August 2, 2016	5.	perpetual		
(Date of incorporation)		(Date of duration, if other than perpetual)		
	(Date first transacted business in (SEE SECTIONS 607,1501 & 607.1.	n Florida, if prior to registration) 502, F.S., to determine penalty liability))	
508 Compromise	Street Kenner, LA 70062			
	(Princi)	oal office address)		
7830 Country Ru	n Pkwy Orlando, FL 32818			
	(Current maili	ng address, if different)	37 () 8	
. Name and street	et address of Florida registered agent; (P.0	D. Box NOT acceptable)	THE SEED ALONG THE SE	
Name:	Cora Graham		<u>स्</u> रम्भ ने गेलू -	
ffice Address:	7830 Country Run Pkwy			
	Orlando	Florida 32818	मुला है	
	(City)	(Zin code)		

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

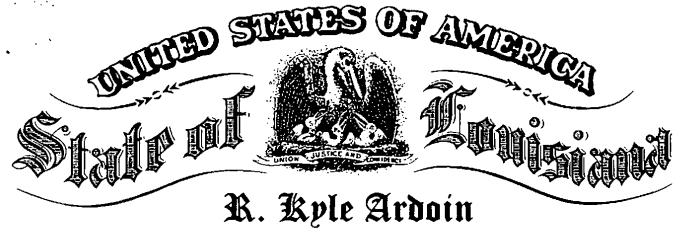
(Registered agent's signature)

(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:	
A. DIRECTORS	

Chairman: Cutler Gultry		
Address: 7830 Country Run Pkwy		
Orlando, FL 32818		
Vice Chairman:		
Address:		
 		
Director:		
Address:		
Director:		
Address:	F- (2-)	
· · · · · · · · · · · · · · · · · · ·	ر مصر م دوم 	
B. OFFICERS	年 (大学 (大学 (大学 (大学	IN 17
President:	<u> </u>	<u> </u>
Address:		<u>12</u>
	. \$ fra	<u>3</u> 5
Vice President:		
Address:		
Secretary:		
Address:		
Treasurer:		
Address:		
NOTE: If necessary, you may attach an addendum to the application listing addition	mal officers and/or director	S .
12		
Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above		
are true and that he or she is aware that false information submitted in a document to a third degree felony as provided for in s.817.155, F.S.	the Department of State c	onstitutes
13. Cutter Gultry Cutler Gultry		
(Typed or printed name and capacity of person signing appl	ication)	



SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that

the Articles of Incorporation of

CHASING DESTINY INC

Domiciled at KENNER, LOUISIANA,

Were filed in this Office and a Certificate of Incorporation was issued on August 02, 2016,

I further certify that no Certificate of Dissolution or Termination has been issued.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on.

June 12, 2019

A CAPIDE PLEASE TARY OF SAFE

Certificate ID: 11086989#NVA42

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed.

www.sos.la.gov

/2 1 Fe No 2 Secretary of State

Web 42348603D