## F9000005551

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

Office Use Only



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7019 DEC 16 PO 10: 34

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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date: 12/16	6/2019 	
Name: M	erritt Walker	
Reference #:	1163115	
Entity Name:		CHICOECO, INC.
✓ Articles of In ✓ Amendment		orization to Transact Business
☐ Change of A		<b>1</b> 913 C.
Reinstateme	ent	
Conversion		  
☐ Merger		
☐ Dissolution/\	Withdrawal	
Fictitious Na	me	
Other		
Authorized Amount		D
Signature:	<u> </u>	

COGENCY GLOBAL INC. 10 E 40" - 51, 10" - FL NY, NY 13016 D: +1.212.947.7200 P: 800.221.0102 F: 800.944.6607

## **COVER LETTER**

TO:	Registration Section Division of Corporations	r		
SUBJ	ECT:	CHICOE	ECO, INC.	
	<del></del>	Name of corporation - m	ust include suffix	
Dear S	ir or Madam:			
"Certif		ertificate of Good Standing	horization to Transact Business in Flori g" and check are submitted to register the n Florida.	
Please	return all correspondence	concerning this matter to t	the following:	
	· · · · · · · · · · · · · · · · · · ·	Andrew Kell	er	
		Name of Pers	on	
		CHICOECO, II	NC.	
	<del>-</del>	Firm/Compan	у	
		747 FORTRESS	S ST,	~
		Address		3
	CHICO CA 95973			문
		City/State and Z Rody DChiu	cip code  boa com  uture annual report notification)	2119 BEG 16 M
	E-mai	address: (to be used for f	uture annual report notification)	
For fur	ther information concerning	g this matter, please call:		M10: 34
		at () _		
	Name of Person	Area Code	Daytime Telephone Number	
	STREET/COURIER AN Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	

\$78.75 Filing Fee & Certified Copy

\$87.50 Filing Fee, Certificate of Status &

Certified Copy

Enclosed is a check for the following amount:

\$78.75 Filing Fee & Certificate of Status

\* \$70.00 Filing Fee

## 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.

1.		CHICOECO	, INC.		
		rporation; must include "INCORPORATED," " rp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATION,"		
_	16			<del></del>	
(			opted for the purpose of transacting business in Flo	rida)	
2		CALIFORNIA 3.	(FEI number, if applicable)		
	(State or country				
4		08/13/2007 5	Perpetual (Date of duration, if other than perpetual)		
	(Date o	of incorporation)	(Date of duration, if other than perpetual)		
6		Upon filir			
		(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502			
7		747 FORTRESS ST, CI	HICO CA 95973		
		(Principal	office address)		
	<u> </u>	(Current mailing a	address, if different)		
				~ `	
8. N	lame and street	address of Florida registered agent: (P.O. l	Box <u>NOT</u> acceptable)	2019	
	Name:	COGENCY GLOBAL INC.	_		
Offi	ce Address:	115 North Calhoun Street, Suite 4	_	5	
		Tallahassee	Florida 32301	مرد: اعل	•
		(City)	, Florida <u>32301</u> (Zip code)	10: 34	
Λ TI		-A3		<del>क</del>	
		nt's acceptance: d as revistered avent and to accept service	of process for the above stated corporation a	t the s	dace
desiį	gnated in this a	application, I hereby accept the appointmen	nt as registered agent and agree to act in this	capac	city. I
furti duti	her agree to col es and I am fa	mply with the provisions of all statutes rela miliar with and accept the obligations of n	tive to the proper and complete performance	of my	ע
	co, una 1 um ju	minus with una accept the obligations of w	ly position as registered agent.		
		Mar			
	<del></del>	(Registered age	nt'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: Address: \_\_\_\_ Vice Chairman: Address: Andrew Keller Director: \_\_ 747 FORTRESS ST, CHICO CA 95973 Address: Director: Address: B. OFFICERS Andrew Keller Address: \_\_\_\_\_\_ 747 FORTRESS ST, CHICO CA 95973 Vice President: Address: Secretary: Andrew Keller 747 FORTRESS ST, CHICO CA 95973 Address: Treasurer: NOTE: If necessary, you may agrach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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. Andrew Keller - President

## State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

CHICOECO, INC.

FILE NUMBER:

C3020945

FORMATION DATE:

08/13/2007

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financhal condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of December 12, 2019.

ALEX PADILLA Secretary of State