

F200000001023

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

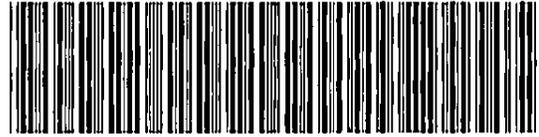
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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02/18/20--01021--027 ++78.75

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TALLAHASSEE, FLORIDA

Handwritten initials and a checkmark.

COVER LETTER

TO: Registration Section
Division of Corporations
CHARMING CHARLIE USA CORP.

SUBJECT: _____
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:
LOVETTE DOBSON

	Name of Person
17350 STATE HWY 249 #220	Firm/Company
HOUSTON, TX 77064	Address
EFILE1234@INCFILE.COM	City/State and Zip code
E-mail address: (to be used for future annual report notification)	

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For further information concerning this matter, please call:

LOVETTE DOBSON	1	888-462-3453
Name of Person	at (_____)	Daytime Telephone Number
	Area Code	

STREET/COURIER ADDRESS:
 Registration Section
 Division of Corporations
 Clifton Building
 2661 Executive Center Circle
 Tallahassee, FL 32301

MAILING ADDRESS:
 Registration Section
 Division of Corporations
 P.O. Box 6327
 Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing 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.

CHARMING CHARLIE USA CORP.

1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
DELAWARE

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
10/10/2019 PERPETUAL

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
1330 POST OAK BLVD STE 1200 , HOUSTON, TEXAS 77056

7. _____
(Principal office address)
1330 POST OAK BLVD STE 1200 , HOUSTON, TEXAS 77056

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: LEGALINC CORPORATE SERVICES INC.
5237 SUMMERLIN COMMONS, SUITE 400

Office Address: FORT MYERS, Florida 33907
(City) (Zip 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)

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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Charles J Chanaratsopon Trust UAD 12-11-2008 ✓

Director: _____

1330 POST OAK BLVD, SUITE 1200 , HOUSTON TX 77056

Address: _____

Stephen Lovell ✓

Director: _____

1330 POST OAK BLVD, SUITE 1200 , HOUSTON TX 77056

Address: _____

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B. OFFICERS

Charles Chanaratsopon ✓

President: _____

1330 POST OAK BLVD, SUITE 1200 , HOUSTON TX 77056

Address: _____

Stephen Lovell

Vice President: _____

1330 POST OAK BLVD, SUITE 1200 , HOUSTON TX 77056

Address: _____

Charles Chanaratsopon ✓

Secretary: _____

1330 POST OAK BLVD, SUITE 1200 , HOUSTON TX 77056

Address: _____

Charles Chanaratsopon ✓

Treasurer: _____

1330 POST OAK BLVD, SUITE 1200 , HOUSTON TX 77056

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. _____

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.

Charles Chanaratsopon - PRESIDENT

13. _____

Charles Chanaratsopon

(Typed or printed name and capacity of person signing application)

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CHARMING CHARLIE USA CORP." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE ELEVENTH DAY OF FEBRUARY, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CHARMING CHARLIE USA CORP." WAS INCORPORATED ON THE TENTH DAY OF OCTOBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

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TALLAHASSEE, FLORIDA




Jeffrey W. Bullock, Secretary of State

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SR# 20201008592

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202366229

Date: 02-11-20