F24000002874

(Req	uestor's Name)		
(Add	iress)		
7.11			
(Add	ress)		
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Đoc	ument Number)		
Certified Copies	Certificates	s of Status	
Special Instructions to Filing Officer:			
W24-7	4219		

Office Use Only



500427749145

RECEIVED

JUN 0 3 2024 K. Brumbley



May 14, 2024

CSC

SUBJECT: CHAPTER 4 CORP. Ref. Number: W24000074319

Please give original submission date as file date.

We have received your document for CHAPTER 4 CORP. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Ariel Jones Regulatory Specialist II

Letter Number: 824A00010518

CSC - Tallahassee CSC 1201 Hays Street Tallahassee, FL 32301-2607 850-558-1500, Ext:

To: Department Of State, Division Of Corporations

From: Shauna Godbolt

Ext:

Date: 05/10/24 Order #: 1504102-1 Re: Chapter 4 Corp.

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$70.0 - FL State Account Number:

12000000195

Certificate of Good Standing from State of Incorporation

auth

Please take the following action:
File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO:	Registration S Division of C					
SURI	ECT:	CHAPTEI	R 4 CORP.			
GUD	ECT.	Name	e of corporatio	n - mus	t include suffix	<u> </u>
Dear S	Sir or Madam:					
"Certif	ficate of Exister		te of Good Sta	nding"	and check are sub	ct Business in Florida," mitted to register the
Please	return all corre	spondence concern	ning this matte	r to the	following:	
			Name of	f Person	<u></u>	
			Firm/Co	npany		
	· · · · · · · · · · · · · · · · · · ·		Addı	ress		
			City/State	and Zip	code	
		E-mail addres	ss: (to be used	for futu	re annual report r	otification)
For fur	ther informatio	n concerning this	matter, please	call:		
			at (Area Coo)		
	Name of Pers	son	Area Coo	de	Daytime Telepi	none Number
	Registration S Division of Co The Centre of	orporations Tallahassee oc Street, Suite 81			MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7
Please n		r the following amble to: FLORIDA E \$78.75 Fili Certificate	DEPARTMENT ng Fee & [□ \$78.7	ATE 5 Filing Fee & fied 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.

1.	CHAPTER 4 CORP.		
(Enter name of "Inc.," "Co.," "C	corporation; must include "INCORPORATED," "Corp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATION,"	,
BLESSED	CHERRY 1994 CORP.		
(If name unavai	lable in Florida, enter alternate corporate name add	opted for the purpose of transacting l	ousiness in Florida)
2. New	York 3	13-3747037	
	rry under the law of which it is incorporated)	(FEI number, if appli	icable)
4.	12/1/1993		
	e of incorporation)	(Date of duration, if other tha	n perpetual)
6.			
o	(Date first transacted business in F		
	(SEE SECTIONS 607.1501 & 607.1502	, F.S., to determine penalty liability)	H
7	3rd Floor, 62 King Street, New York, NY 10014		
	(Principal office	street address)	
	(Current mailing a	ddress, if different)	2024
		•	202 4127
8. Name and <u>stre</u>	(Current mailing a et address of Florida registered agent: (P.O. E	•	202417 Y 13
		•	ω ·
Name:	et address of Florida registered agent: (P.O. E Corporation Service Company	•	ω ·
Name:	et address of Florida registered agent: (P.O. E Corporation Service Company 1201 Hays Street	•	3
	et address of Florida registered agent: (P.O. E Corporation Service Company 1201 Hays Street Tallahassee	•	3

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.

A. DIRECTORS Attached list				
□ Chairman	Name:	□ Chairman	Name:	· · · · · · · · · · · · · · · · · · ·
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		□Director		
□President		□President		
□Vice President		□ Vice President		
☐ Secretary	□Treasurer	☐ Secretary		□Treasurer
□Other	Other	□ Other		□Other
□ Chairman	Name:	□ Chairman	Name:	
□ Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		□Director	 	
□President		□President		
□Vice President		☐ Vice President		
□Secretary	Treasurer	☐ Secretary		□Treasurer
Other	Other	□Other		□Other
□Chairman	Name:	□Chairman	Name:	
□ Vice Chairman	Address:	□Vice Chairman	Address:	
Director		□Director		
□President		□President		
□Vice President		□ Vice President		
□Secretary	Treasurer	Secretary		□Treasurer
Other	Other	Other		□Other
Important Notice: Use individuals may be 12.	Jse an attachment to report more than six (6). The attachment to the index when filing your Florida Departm	tachment will be image nent of State Annual Re or Officer	eport form.	
The officer or direct she is aware that far s.817.155, F.S.	tor signing this document (and who is listed in numb lse information submitted in a document to the Depa	per 11 above) affirms the interest of State constitution	nat the facts states ates a third degree	d herein are true and that he or e felony as provided for in
13. Matthe	w A. Cordell, Assistant Secretary			

Chapter 4 Corp.

Chapter 4 Corp. Officers and Directors

Name		Address
Bryan H. McNeill	Vice President	105 Corporate Center Blvd. Greensboro, NC 27408
Douglas L. Hassman	Director	105 Corporate Center Blvd.Greensboro, NC 27408
Douglas L. Hassman	Vice President	105 Corporate Center Blvd. Greensboro, NC 27408
Ellis G. Lindsey	Vice President - Finance	3rd Floor, 62 King Street, New York NY 10014
James Jebbia	President	3rd Floor, 62 King Street, New York NY 10014
Jennifer S. Sim	Vice President and Secretary	1551 Wewatta Street, Denver, CO 80202
Kyle John Demers	Vice President	3rd Floor, 62 King Street, New York NY 10014
Mark R. Townsend	Assistant Secretary	105 Corporate Center Blvd. Greensboro, NC 27408
Matthew A. Cordell	Assistant Secretary	105 Corporate Center Blvd. Greensboro, NC 27408
Matthew H. Puckett	Vice President	1551 Wewaita Street, Denver, CO 80202
Michael Edward Phillips	Director	105 Corporate Center Blvd. Greensboro, NC 27408
Michael Edward Phillips	Vice President	106 Corporate Center Bivd. Greensboro, NC 27408
West Rubinstein	Vice President	3rd Floor, 62 King Street, New York NY 10014

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, BRENDAN C. HUGHES, Acting Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: CHAPTER 4 CORP.

DOS ID Number: 1776195

Entity Type: DOMESTIC BUSINESS CORPORATION

Entity Status: EXISTING

Date of Initial Filing with DOS: 12/01/1993

Statement Status: CURRENT Statement Due Date: 12/31/2025

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



WITNESS my hand and official seal of the Department of State, at the City of Albany, on May 10, 2024 at 09:31 A.M.

Brandon C Higher

BRENDAN C. HUGHES Acting Secretary of State