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Special Instructions to F	Filing Officer:			
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Office Use Only



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May 20, 2024

HELEN J. DEJESUS 1438 ASTOR STREET SOUTH PLAINFIELD, NJ 07208 US

SUBJECT: CHAMO PROPERTY SOLUTIONS INC.

Ref. Number: W24000077443

We have received your document for CHAMO PROPERTY SOLUTIONS INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Andrea Andrews Regulatory Specialist II

Letter Number: 224A00011027

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JUN 2 0 2024

#### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: CHAMO PROPERTY SOLUTIONS IN	NC.
Name of corpora	ntion - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact bu	
Please return all correspondence concerning this ma	atter to the following:
HELEN J. DEJESUS	
Name	e of Person
CHAMO PROPERTY SOLUTIONS INC.	
Firm/	Company
1438 ASTOR STREET	
Λ	Address
SOUTH PLAINFIELD, NEW JERSEY 07208	
City/Sta	ate and Zip code
ADMIN@CHAMOSVC.COM	
E-mail address: (to be us	sed for future annual report notification)
For further information concerning this matter, plea	ase call:
Helen J. DeJesus	451-2827
Name of Person Area	Code Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:  Please make check payable to: FLORIDA DEPARTM  S70.00 Filing Fee S78.75 Filing Fee &  Certificate of Status	ENT OF STATE  S78.75 Filing Fee & S87.50 Filing Fee, Certified Copy  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.

(If name unavaile	ble in Florida, enter alternate corporate name ac	loated for the assument of temperation b	anaing as in Planida
NEW IEDS			ousmess in Florida)
	3	92-2337340	
(State or country under the law of which it is incorporated) 02/24/2023		(FEI number, if applicable) PERPETUAL	
(Date of 05/01/2024	of incorporation)	(Date of duration, if other tha	n perpetual)
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150	2, F.S., to determine penalty liability)	
1438 ASTO	R STREET, SOUTH PLAINFIELD, N	NEW JERSEY 0708(	
	(Principal office	street address)	
	(Current mailing	address, if different)	
Name and street	address of Florida registered agent: (P.O.	Box NOT acceptable)	رِبريا ا
Name:	Northwest Registered Agent LLC		ליידוו לווא 20
ffice Address:	7901 4th St N STE 300,		) PH
	St. Petersburg	. Florida 33702 (Zip code)	<del></del>
	(City)	(Zip code)	53
lesignated in this d arther agree to co	nt's acceptance: of as registered agent and to accept service application, I hereby accept the appointme mply with the provisions of all statutes rel with and accept the obligations of my posi	ent as registered agent and agree a ative to the proper and complete p	to act in this capaci

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors (up to six (6) total):

(Registered agent's signature)

under the law of which it is incorporated.

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

, A. DIRECTORS			
□Chairman	Helen De Jesus Name:	□Chairman	Name:
□ Vice Chairman	Address: 1438 Astor Street	□Vice Chairman	Address:
□Director	South Plainfield	□Director	
<b>■</b> President	New Jersey	□President	
□Vice President	07080	□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
individuals may be	Use an attachment to report more than six (6). The added to the index when filing your Florida De Signature of Director signing this document (and who is listed in 1).	partment of State Annual Re	port form.
	lse information submitted in a document to the I		tes a third degree felony as provided for in
1.2			<del></del>

## STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

#### CHAMO PROPERTY SOLUTIONS, INC. 0450926162

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on February 14, 2023.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

HELEN DE JESUS 1438 ASTOR STREET SOUTH PLAINFIELD, NJ 07080



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 15th day of June, 2024

Elizabeth Maher Muoio State Treasurer

Certificate Number: 6154463483

Verify this certificate online at

https://www.Lstate.nj.us/FYTR\_StandingCert/JSP/Verify\_Cert.jsp