

N16000007883

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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 20, 2016

HJ UNDERHILL, III  
490 N HARBOR CITY BLVD.  
MELBOURNE, FL 32935

SUBJECT: CHOSEN-INC  
Ref. Number: W16000050314

We have received your document for CHOSEN-INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is .

T13000000934,

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) 245-6052.

Nadira D McClees-Sams  
Regulatory Specialist II

Letter Number: 016A00015161

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## COVER LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**SUBJECT:** CHOSEN-INC

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

☒ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee &  
Certificate of  
Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate

**ADDITIONAL COPY REQUIRED**

**FROM:** H J UNDERILL, III

\_\_\_\_\_  
Name (Printed or typed)

490 N HARBOR CITY BLVD.

\_\_\_\_\_  
Address

MELBOURNE, FL 32935

\_\_\_\_\_  
City, State & Zip

321-242-2224 X 112

\_\_\_\_\_  
Daytime Telephone number

buz@underill.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

~~CHOSEN INC~~ HOSPITALITY LIFE, INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
490 N HARBOR CITY BLVD.

Mailing address, if different is:

MELBOURNE

FLORIDA, 32935

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Said corporation is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c) (3) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

No part of the net earnings of the corporation shall inure to the benefit of, or be distributable to its members, trustees, officers, or other private persons, except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth herein. No substantial part of the activities of the corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the corporation shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office. Notwithstanding any other provision of these articles, this corporation shall not, except to an insubstantial degree, engage in any activities or exercise any powers that are not in furtherance of the purposes of this corporation.

COPY

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed:

ELECTION OF THE STOCK HOLDERS

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: CHRIS CONNEEN

Name and Title: PRESIDENT/DIRECTOR

Address: 2250 TOWN CENTER AVE., STE 113  
VIERA, FL 32940

Address:

Name and Title: H J UNDERILL, III

Name and Title: SECRETARY/TREASURER

Address: 490 N HARBOR CITY BLVD.  
MELBOURNE, FL 32935

Address:

Name and Title:

Name and Title:

Address:

Address:

2016 JUL 11 AM 8:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: H J UNDERILL, III

Address: 490 N HARBOR CITY BLVD.

MELBOURNE, FL 32935

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: H J UNDERILL, III

Address: 490 N HARBOR CITY BLVD

MELBOURNE, FL 32935

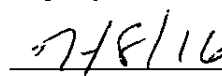
**ARTICLE VIII DISTRIBUTION UPON DISSOLUTION:**

Upon the dissolution of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not so disposed of shall be disposed of by a Court of Competent Jurisdiction of the county in which the principal office of the corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

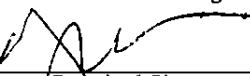


\_\_\_\_\_  
Required Signature of Registered Agent

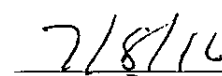


\_\_\_\_\_  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that any 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.*



\_\_\_\_\_  
Required Signature of Incorporator



\_\_\_\_\_  
Date