

11/ P19000084278

Division of Corporations

Florida Department of State
Division of Corporations
Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H19000331662 3)))



H190003316623ABC+

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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : LEGALZOOM.COM INC.
Account Number : 120010000062
Phone : (323)962-8600
Fax Number : (323)962-3889

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
chivun Inc.

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$78.75

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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Help

Matt Singam

From: coronline@dos.state.fl.us
Sent: Tuesday, November 5, 2019 3:49 PM
To: DL-Onlinefilings
Subject: Corporate Filing - 900336119159

Document Number: W19000097712
Entity Name: CHIVUN INC.
Tracking Number: 900336119159
Pin Number: 9159

We received your online transmitted document. However, the document has not been filed for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation, unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

One or more major words may be added to make the name distinguishable.

The document number of the name conflict is .

To make the necessary corrections to your filing, return to our website at www.sunbiz.org <<http://www.sunbiz.org>> and select the filing type you are wanting to correct under the 'Filing Services' menu and click on the 'File or Correct' button.

Then enter your tracking number and pin number in correction box on the right hand side of the screen. Both of these numbers are listed in the top portion of this email. Next, simply click on "update filing" to access the document you previously submitted to our office.

Please disregard this letter if you have contacted our office and were advised how to correct your document online.

This filing will be considered abandoned in 60 days, if no response is received.

If you have any questions concerning your filing please call 850-245-6052.

Keyna Page
Regulatory Specialist II
New Filing Section

Letter Number: 191105164913-900336119159

Vaishali Dubey
10480 Creston Glen Circle E
Jacksonville FL 32256

State of Florida
County of Duval

BEFORE ME, the undersigned Notary, Purnima Ganju before whom affidavit is sworn, on this 15th day of October 2019, personally appeared Vaishali Dubey, known to me to be a credible person and of lawful age, who being by me first duly sworn, on her oath, deposes and says:

I, Vaishali Dubey, hereby release my name Chivun LLC to Legalzoom and give them full authorization to file the entity Chivun INC on my behalf, as I will not be reinstating the dissolved business and have no intention of revoking the dissolution.

Signed, (name of original incorporator)

Vaishali

Vaishali Dubey

10480 Creston Glen Circle East

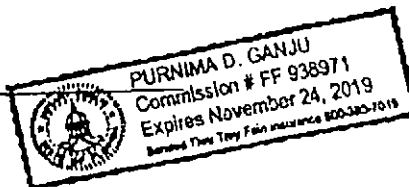
Jacksonville

State of Florida

County of Duval

Sworn to (or affirmed) and subscribed before me this 15th day of October, 2019 (year), by Vaishali Dubey (name of person making statement).

Purnima Ganju
(Signature of Notary Public - State of Florida)



PURNIMA GANTU

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known _____ OR Produced Identification

Type of Identification Produced FLDL: D100-860-75-960-0 .
EXP: 12/20/2025 .

COVER LETTER

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

SUBJECT: chivun Inc.

(PROPOSED CORPORATE NAME - **MUST INCLUDE SUFFIX**)

Enclosed are 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 of
Status

ADDITIONAL COPY REQUIRED

FROM: Cheyenne Moseley, Legalzoom.com, Inc.

Name (Printed or typed)

101 N. Brand Blvd., 10th Floor

Address

Glendale, CA 91203

City, State & Zip

323-962-8600 ext. 7625

Daytime Telephone number

onlinefilings@Legalzoom.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 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: chivun Inc.

ARTICLE II PRINCIPAL OFFICE

Principal <u>street</u> address <u>10480 Creston Glen Cir E</u> <u>Jacksonville, FL 32256</u> <hr/> <hr/>	Mailing address, if different is: <hr/> <hr/>
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ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful purposes

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Vaishali Dubey, P, T, S, D</u>	Name and Title: _____
Address: <u>10480 Creston Glen Cir E</u>	Address: _____
<u>Jacksonville, FL 32256</u>	_____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

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: United States Corporation Agents, Inc.
 Address: 5575 S. Semoran Blvd., Suite 36
Orlando, FL 32822

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Cheyenne Moseley, Legalzoom.com, Inc.
 Address: 101 N. Brand Blvd., 11th Floor
Glendale, CA 91203

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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/Registered Agent 11/11/2019
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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/Incorporator 11/11/2019
Date