

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000067123**

1. Corporation Name

CHE-D INC.

2. Principal Office Address - No P.O. Box #

7428 SW14 CT

Suite, Apt. #, etc.

3. Mailing Office Address

7428 SW 14 CT

Suite, Apt. #, etc.

City & State

N. Lauderdale, FL

City & State

N. Lauderdale

Zip

33068

Country

Broward

Zip

33068

Country

Broward

7. Name and Address of Current Registered Agent

Name

George Chin

Street Address (P.O. Box Number is Not Acceptable)

7428 SW 14 CT

Suite, Apt. #, Etc.

City

N. Lauderdale

State

FL

Zip Code

33068

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of

Registered Agent

REGISTERED AGENT MUST SIGN

Date **6/30/2020**

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	George Chin	7428 SW 14 CT	N. Lauderdale, FL 3308
V.P	Lavern Chin	7428 SW 14 CT	N. Lauderdale , FL 33068

10. E-mail Address: **georgechin5@gmail.com**

(To be used for future annual report notification)

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am 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.

SIGNATURE:

GEORGE CHIN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
2020 JUL -1 AM 9:08
SECRETARY OF STATE
TALLAHASSEE, FL

000347454630
07/01/20--01003--028 **2550.00

CR2E081 (11/10)

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

6/30/2020 754 234
4283

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

CHED INC.

Signature _____

Requested by: BA

07/01/20

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

174 Ponder's Printing • Thomasville, GA 30761

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
✓ Annual Report / Reinstatement _____
____ Cert. Copy _____
✓ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

JUL 02 2020