

State of California Secretary of State

Statement of Information

(Foreign Corporation)
FEES (Filing and Disclosure): \$25.00.
If this is an amendment, see instructions.

IMPORTANT - READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

ENDORSED - FILED in the office of the Secretary of State of the State of California

CORPORATE NAME Chive Charities	4 431117 7	
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	water	
2. CALIFORNIA CORPORATE NUMBER 3481945	This Space for Filing	Use Only
No Change Statement (Not applicable if agent address of record is a P.O. Box address	s See instructions.)	
A Marie Company of the Local Challenger	ent of Information filed with the Californ	nia Secretary
of State or no statement of information has been previously filed, this form mu	ist be completed in its entirety.	
If there has been no change in any of the information contained in the last State	ment of Information filed with the Californ	ia Secretary
of State, check the box and proceed to Item 13.		
Description of the state of the	A and E connet ha P () Payer)	
Complete Addresses for the Following (Do not abbreviate the name of the city. Items		ZIP CODE
4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE		90291
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5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	****	ZIP CODE
701 Ocean Front Walk, Unit 3	enice CA	90291
6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4	CITY STATE	ZIP CODE
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Names and Complete Addresses of the Following Officers (The corporation mu	st list these three officers. A comparable t	me for the specific
officer may be added beyoner the preprinted littles on this form must not be altered to		
officer may be added; however, the preprinted titles on this form must not be altered.)		
7. CHIEF EXECUTIVE OFFICER/ ADDRESS	***	ZIP CODE
7. CHIEF EXECUTIVE OFFICERV ADDRESS Leo Resig 701 Ocean Front Walk, Unit 3 Ve	enice CA	ZIP CODE 90291
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