

State of Rhode Island and Providence Plantations
Department of State - Business Services DivisionRECEIVED
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2020 OCT -9 PM 12:17

Application for Certificate of Authority**FOREIGN Business Corporation**

→ Filing Fee: \$310.00 minimum

Pursuant to the provisions of RIGL 7-1.2-1405, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement:

1. The name of the corporation is:

Chowbus, Inc.

2. It is incorporated under the laws of:

Delaware

3. The name, if different, which it elects to use in Rhode Island is:

(a) If the name of the corporation in its jurisdiction of incorporation does not contain the word "corporation", "company", "incorporated", or "limited," or an abbreviation thereof, then list the name of the corporation with the addition of one of the above corporate endings for use in Rhode Island:

(b) If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application:

4. The date of its incorporation is: **May 17, 2017**And the period of its duration is: **CHECK ONE BOX ONLY**☒ Perpetual (on-going)☐ Date certain for dissolution _____

5. The address of its principal office is:

55 E. Jackson Blvd., Ste. 450, Chicago, IL 60604

6. The name and address of the initial registered agent/office in Rhode Island:

Agent Name **Corporation Service Company**Street Address (NOT a P.O. Box) **222 Jefferson Boulevard, Suite 200**City/Town **Warwick**State **RHODE ISLAND**Zip Code **02888****MAIL TO:****Division of Business Services**

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov**FILED**

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7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:
Online food deliver platform that delivers authentic Asian food.

8. (a) The names and respective addresses of its directors (optional, unless directors are required under the laws of the state or country of which it is incorporated):

NAME	ADDRESS
Eddie Lou	55 E. Jackson Blvd., Ste. 450, Chicago, IL 60604
Suyu Zhang	55 E. Jackson Blvd., Ste. 450, Chicago, IL 60604
Linxin Wen	55 E. Jackson Blvd., Ste. 450, Chicago, IL 60604
Harley Miller	55 E. Jackson Blvd., Ste. 450, Chicago, IL 60604

Check the box to indicate an attachment ☐

8. (b) The names and respective addresses of its principal officers (mandatory if directors are not required under the laws of the state or country of which it is incorporated):

OFFICE	NAME	ADDRESS
PRESIDENT	SEE ATTACHED	
VICE PRESIDENT		
TREASURER		
SECRETARY		

Check the box to indicate an attachment ☒

9. The aggregate number of shares which it has authority to issue; itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

NUMBER OF SHARES	CLASS	SERIES	PAR VALUE OR STATE NO PAR VALUE
30,000,000	Common		\$0.0001
5,155,808	Preferred	Series Seed	\$0.0001
8,518,737	Preferred	Series A	\$0.0001
2,937,719	Preferred	Series B	\$0.0001

10. An estimate, as a percentage, of the proportion that the estimated value of the property of the corporation to be located within this state during the following year bears to the value of all property of the corporation to be owned during the following year, wherever located. (Note: Percentage obtained from worksheet.)

0 %

11. An estimate, as a percentage, of the proportion of the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year compared to the gross amount thereof which will be transacted by the corporation during the following year. (Note: Percentage obtained from worksheet.)

.1 %

12. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of this filing.

13. Date when the Certificate of Authority will be effective: **CHECK ONE BOX ONLY**

☒ Date received (Upon filing)

☐ Later effective date (Date must be no more than 90 days from the date of filing) _____

Under penalty of perjury, I declare and affirm that I have examined this Application for Certificate of Authority, including any accompanying attachments, and that all statements contained herein are true and correct.

Type or Print Name of Authorized Officer

Eddie Lou

Date

10/7/2020

Signature of Authorized Officer of the Corporation

DocuSigned by

Eddie Lou

DocuSign Envelope ID: 2B62332E-DD1C-4A81-969E-C24A43509A91

SIGN DOCUMENT HERE

FOREIGN BUSINESS CORPORATION APPLICATION FOR CERTIFICATE OF AUTHORITY

Additional Information Sheet

Chowbus, Inc.

8(b). Names and business addresses of officers:

Office	Name	Address
President	Eddie Lou	55 E. Jackson Blvd., Ste. 450 Chicago, IL 60604
Chief Executive Officer	Linxin Wen	55 E. Jackson Blvd., Ste. 450 Chicago, IL 60604
Chief Technology Officer	Suyu Zhang	55 E. Jackson Blvd., Ste. 450 Chicago, IL 60604
Treasurer	Pu Chen	55 E. Jackson Blvd., Ste. 450 Chicago, IL 60604
Chief Operating Officer	Gajin "Kenny" Tsai	55 E. Jackson Blvd., Ste. 450 Chicago, IL 60604
Secretary	Pu Chen	55 E. Jackson Blvd., Ste. 450 Chicago, IL 60604
Assistant Secretary	Linxin Wen	55 E. Jackson Blvd., Ste. 450 Chicago, IL 60604

Delaware

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CHOWBUS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTH DAY OF OCTOBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CHOWBUS, INC." WAS INCORPORATED ON THE SEVENTEENTH DAY OF MAY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



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SR# 20207708192

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 203816913

Date: 10-07-20



State of Rhode Island

Department of State | Office of the Secretary of State

Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island,
hereby certify that this document, duly executed in accordance with the provisions
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this

office on this day:

October 09, 2020 12:17 PM

A handwritten signature in blue ink, reading "Nellie M. Gorbea". The signature is fluid and cursive.

Nellie M. Gorbea
Secretary of State

