

Company Mail Forwarding

Includes Daily Mail & Fax Receiving & Forwarding Service



L FOR QUESTIONS ABOUT YOUR MAIL ACCOUNT, CALL (702) 699-9389 10:a.m. - 4:p.m. Pacific Time

For as little as \$10.00 a month payable annually you may use this Las Vegas address on your annual filing list with the Secretary of State and for official company mail. Although you may not operate a business or work from within our office, you are invited to hold your annual meeting in the boardroom facility. Also our staff will take messages, and receive mail on your behalf. Service includes; use of our street and suite address in Las Vegas, Nevada, as well as a Post Office box; receiving and forwarding of faxes, mail receiving and forwarding (to you), and free re-mailing of post paid letter size mail (from you to others).

TERMS AND CONDITIONS

1. THIS MAIL SERVICE RECEIVES AND FORWARDS FLAT LETTER DOCUMENT TYPE BUSINESS MAIL—BANK CHECKS ARE ACCEPTABLE—first class and pre-sorted first class only—OUR OFFICE IS NOT A PARCEL DROP OR PRODUCT STORAGE FACILITY. Certified or registered mail (other than legal service in the name of the firm), or mail items weighing 16 ounces or more will be subject to a special handling fee of \$15.00.

2. We will establish your mail account immediately upon payment. You may complete and return U.S. Postal Service form 1583, when it is convenient. If form 1583 is not attached to this application, you can obtain it from our website www.chqinc.com (Click on "FORMS"). If you change your mailing address it will be necessary to submit a new 1583 form but you need not notarize it again; or if you have a previous 1583 on file with us, a second account not need be notarized.

3. Daily forwarding, of up to 100 pieces of mail a month is included in the service—you pay only first class postage. (Additional pieces will be charged for at \$2.00 each.) Bulk mail, magazines, third class mail, etc., will be discarded.

4. Commercial carrier flat mail will be accepted and unless you have advised us otherwise, will be forwarded to you by standard U. S. Mail. If you wish to have these items *expressed on to you*, (Fedex only) please notify us in advance. **Your address in Las Vegas is:**

**2235 E. Flamingo Road, Suite 201 G
Las Vegas, Nevada 89119**

**Your Fax number in Las Vegas is:
702 796-6694**

5. Only faxes received under the company name listed on line 8 below will be re-faxed to you. Faxes forwarded will be charged your account at the rate of 20¢ per page within the U.S. and otherwise at the rate charged to us. If you do not have a fax number, or if your fax number will not accept the transmission, we will treat your fax as standard U.S. mail.

NO, I do not want fax service ' **YES, I want fax service** ' Please fax back to me at (_____) _____

6. The length of service shall be 12 months (non-cancellable) from the date indicated below and shall be renewable at the discretion of CHQ, and; office suite location may only be utilized as an address—not a physical office space. Mail and faxes will only be accepted in the principal name on your account (see line 8) and may be directed to the care of any officer, member, or partner.

7. You will be required to maintain a credit balance in your postage account—we will notify you when your account balance is low. Mail will not be re-mailed to you if your balance falls to zero. If your service is terminated it will be your sole responsibility to notify your senders of your change of address—neither CHQ nor the U.S. Postal Service will accept forwarding requests. All mail received by us after termination will be discarded.

8. Mail may only be directed to the name on your account. An in-care-of party may be a principal officer, member, or partner as named below:

Company account name "In care of" Officer, owner, or other

Street & Suite or P.O. Box

City **State** **Zip Code** **Phone**

FOR FIRMS WHO HAVE FORMED THEIR ENTITY THRU CHQ OR FOR WHOM WE ARE THE RESIDENT AGENT, THE FOLLOWING FEES APPLY:

✓ I have included the \$120.00 annual fee plus a \$20.00 postage Total \$140.00 '

I understand the terms & conditions for office location, mail, and fax services as described above, and agree that upon termination of such services it will be my responsibility to notify senders of my new address and; mail received by CHQ after such termination will be discarded. I further agree to abide by all postal regulations, hold harmless CHQ and it's employees, officers, and directors, and swear that my business activities are and will be for legal purposes only and I further understand that CHQ may at its sole discretion terminate this service at any time for any reason, thereby refunding any unused period of service as well as funds on deposit.

I further understand that some registered company names are in the form of initials only (e.g., NBS, Inc; CDC Inc, and so on), and if I use initials when they are not my full company name it may be in conflict with another company that possesses that legal name, whereupon my mail delivery cannot be guaranteed.



Sign here and make a copy for your files

Date

Rev 2/1/06

Guidelines for completion of U.S. Postal Service form 1583

NOTE: Failure to submit form 1583 at this time will not hold up your entity formation or forwarding of mail

If Postal Service form 1583 is not included with this document, go to www.chqinc.com and click "FORMS"

The following information is intended as a guide only. If you have questions regarding any part of form 1583, please call or visit your local post office. CHQ cannot offer information beyond what is contained herein. Please note that the Postal Service will not accept incomplete or incorrect applications. Any such applications will be returned for correction.

Box

1. Date submitted

2. Your company name: (Corp, LLC, Partnership, or other entity)

3. CHQ Incorporated, 2235 E. Flamingo Rd., Suite 201 G, Las Vegas NV 89119 (do not use zip+ 4)

4. CHQ Incorporated, 2235 E. Flamingo Rd., Suite 201 G, Las Vegas NV 89119 (do not use zip+ 4)

5. This authorizes CHQ to sign accepting registered or certified mail. ANSWER YES

6. Your personal name.

7. Your personal home address, and telephone number.

8. READ #8 CAREFULLY: Two types of ID are required- you cannot use credit cards, social security cards or birth certificates!

YOU MUST SEND COPIES OF THE 2 PIECES OF I.D. TO CHQ ALONG WITH FORM 1583

9. Your company name

10. Your business address and telephone number in YOUR city and state. If none, leave blank.

11. Type business you are conducting.

12. If NOT a corporation, enter the names of all persons that will receive mail. (I.D. for each person must be included as specified under number 8.

13. Include names and addresses of all officers.

14. Enter Clark County, Nevada, and the date of formation of your entity.

15. Have the notary stamp and sign here. (Application cannot be accepted without notarization.)

16. Unless you have a previous notarized 1583 on file with CHQ, please sign and have notarized.