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SECRETARY OF STREET

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#### **COVER LETTER**

TO: New Filing Section Division of Corporations	
SUBJECT: Bow Tender, Inc.	
SUBJECT: Bow Tender, Inc.  Name of corporation - must include suffix	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
Craig A. Tupy	
Name of Person	
Craig A. Tupy  Name of Person  Bow Tender, Inc.  Firm/Company  4481 Page 3 and January #2/3	
Firm/Company	
4481 Bay Beach Lane, #213  Address  Fg. Myers Beach, FL 33931  City/State and Zip code  City/State and Zip code  E-mail address: (to be used for future annual report notification)	
Address	
Fr. Myers Beach, FL 33931	
City/State and Zip code	
craig @ bowtender com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Crars A Tupy at (952) 451-0001 $\frac{8}{12}$ What Mane of Person Area Code & Daytime Telephone Number	icers
Name of Person Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:  New Filing Section  New Filing Section  New Filing Section	
Division of Corporations  Clifton Building  Division of Corporations  P.O. Box 6327	
2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301	
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$78.75 Filing Fee & Certified Copy \$87.50 Filing Fee, Certified Copy	

### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	E WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBM REIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORID		
1 BOWTO	ender Inc.		
(Enter name of co	orporation; must include "INCORPORATED," "COMPANY," "CORPORATION," orp," "Inc," "Co," or "Corp.")		
2. Minn. (State or country)	able in Florida, enter alternate corporate name adopted for the purpose of transacting busing the second se		
	of incorporation)  5.     Duration: Year corp. will cease to exist of the corp.	or "nemetual")	-
•	1/1/2010	n perpetuur j	
0	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)		
7. <u>4481</u>	Bay Beach Lane, #213, Fg. Myevs Beach, Fl. (Principal office address)	33931	
	(Principal office address)		
	(Current mailing address)		
0		energi -	
8. Siles	of murine products	2011 SEC	
(Purpose(s)	) of corporation authorized in home state or country to be carried out in state of Florida)	AHA AHA AHA AHA	
9. Name and stree	t address of Florida registered agent: (P.O. Box NOT acceptable)	-5 SSE	-
Name:	Crais A. Tupy	PA PA	m
Office Address:	4481 Bay Beach lane #213		Lisa
	Fr. Myers Beach, Florida 33931	)	
	(City), Florida (Zip code)		
designated in this further agree to co	gent's acceptance: ed as registered agent and to accept service of process for the above stated corpo application, I hereby accept the appointment as registered agent and agree to ac omply with the provisions of all statutes relative to the proper and complete perfo with and accept the obligations of my position as registered agent.	et in this capac	city. I
<del></del>	(Registered agont's signature)		
11. Attached is a c	certificate of existence duly authenticated, not more than 90 days prior to delivery	of this applica	tion to

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Vice Chairman: \_\_\_ Address: Director: \_ Address: Director: \_ Address: \_ **B. OFFICERS** President: Address: Vice President: \_\_\_ Address: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is 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.

(Typed or printed name and capacity of person signing application)

## state of Minnesota

#### **SECRETARY OF STATE**

Certificate of Good Standing

I, Mark Ritchie, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: BowTender, Inc.

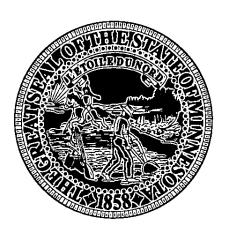
Date Formed: 10/07/2009

Chapter Governed By: 302A

This certificate has been issued on 12/20/10.

SECRETARY OF STATE TALLAHASSEE, FLORIDS

and the same of th



Mark Ritchie
Secretary of State.