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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PłCK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Philip Jacks BAVE AUTHORIZATION BY PHONE TO
DATE 1-19-(U) DOG, EXAM 5)
DOC. EXAM

Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Bennett Surveying, 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:
Esnest R. Bennett Name of Person
Bennett Surveying, Inc.
_
P.O. Box 2729 Address
Brunswick, GA 31521
City/State and Zip code
Roges bennett 6 td5. Net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Keri Hines at 1912 1 265-3856 FG
Name of Person Area Code & Daytime Telephone Number 75 STATE 15 Name of Person
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building Clother Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:
□ \$70.00 Filing Fee \$\overline{\mathbb{X}}\ \$78.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO T	RAMBOSE CIT STATE
husiness in Florida	L. FLORIES
IN COMPLIANCE WITH SECTION 607.1303, FLORIDA STATUTES, THE FOLLOWING IS SUBMIT REGISTER A POREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	TED TO
TO THE STATE OF TH	as and the first that the first the same
(Enter name of composition; must include "INCORPORATED," "COMPANY, "CORPORATION,"	
"lpr.," "Co.," "Corp." "lnc," "Co.," or "Corp.")	
Bennett Surveying of Georgia Inc.	
Denne H Surveying of Georgia, Inc. (It name intervalidate in Plurida, cates alternate conjurate material and adopted for the purpose of transacting handless	Control of the second
. G	· · · · · · · · · · · · · · · · · · ·
2. Creator (State or country under the law of which it is incorporated) (Fish number, if applicable)	
Company to the service of a state of the sta	
4 August 5, 2008 5. Perpetus!	
(State or country under facility of which it is incorporated) 4 PARTER 5, 200 P. 5 Perpetual (Datalion: Year curp, will conso to exist of "	TO THE STATE OF TH
6. Onte first transacted bildiness in Provide, if prior to registration)	
(Date first transaction billiness in Morido, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, 17.3, to determine penalty Hebility)	
7. 102 Massh Harbaur Forkritan unit 103 Kingsland, GN 3	
•	
P.O. Eox 2729 Branswick, GA 31549 (Corout nulling sittens)	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(Carlett Unatiful Stations)	The state of the s
The trade of the	
8. Purpose(s) of corporation withorized in home state or country to be carried out in state of Fibrida)	A CONTRACTOR OF THE CONTRACTOR
•• • •	
9. Name and airest address of Florida registered agent: (F.O. Dox NOT acceptable)	
Name: TIMOTHY A. GOODE	
Office Address of Table 1 to a Color of Table 1 to a color of the	
Office Address: 67/59 WINGATE LANDINGRO.	
YU'LEE FLORIDA 32097 (City) (Zip gode)	
(City) (Zip gode)	
10. Registered agent's accordance:	
Having been named as registered agent and to receip person of process for the above state? of plants	
designated in this application, I hereby accept the appointment or regiment them that accept with the	La Chia Espainistica de la Companya
further agree to comply with the provisions of all suddies relative to the proper and complete performed turn familiar with and accept the obligations of my position as registered agant.	mance of hypublics
and a series of the series of	
Simothy A. Doode	
(Registered agent's menature)	
The second of th	
11. Attached is a certificate of existence duly staticationed, not more than 90 days prior to delivery of the Department of State, by the Secretary of Strike or office official baving custody of corporate records	
under the law of which it is incorporated.	A STATE OF THE STA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS Chairman: ___ Vice Chairman: Address: Director: Address: ____ B. OFFICERS President: Phillip Jackson Address: P.O. Box 1031 Brunswick, GA 31521 Vice President: Roger Bennett (Ernest R.) Address: _____ Brunswick, GA 31521 Roger Bennett Secretary: __ P.O. Box 1031 Brunswick, GA 31521 Address: _____ Treasurer: ______ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Pirector or Officer listed in number 12 of the application) Phillip Jackson - Resident (Typed or printed name and capacity of person signing application)

Control No. 08061135

STATE OF GEORGIA

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF

EXISTENCE I, Wesley B. Tailor, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

BENNETT SURVEYING, INC.

Domestic Profit Corporation

was formed or was authorized to transact business on 08/05/2008 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 11th day of January, 2010

Lesley B Sailf

Wesley B. Tailor Deputy Secretary of State

Certification Number: 4779956-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp