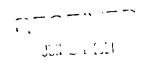
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(Re	questor's Name)		
(Ad	dress)		
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PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			

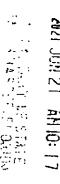
Office Use Only



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06/22/21--01011--023 **78.75



JUN 29 2021 M. SOLONON

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Bhakti Marga America Corporation	
Name of Corporation – must include suffix	
Dear Sir or Madam:	
The enclosed "Application by Foreign Not for Profit Corporation for Author Affairs in Florida". "Certificate of Existence", or "Certificate of Status" and register the above referenced not for profit corporation to conduct its affairs	check are submitted to
Please return all correspondence concerning this matter to the following:	
Debbie Nelson	
Name of Person	
Barron Smith Daugert, PLLC	
Firm/Company	
300 N Commercial Street Address	
Bellingham, WA 98225	
City/State and Zip Code	
dnelson@barronsmithlaw.com	
E-mail address: (to be used for future annual report notif	fication)
For further information concerning this matter, please call:	
Debbie Nelson at (360) 450-5231 Name of Person Area Code Daytime	Telephone Number
·	·
MAILING ADDRESS: STREET/C Registration Section Registratio	COURIER ADDRESS: on Section
Division of Corporations Division of	f Corporations
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle	
	e, FL 32301
Enclosed is a check for the following amount:	
Please make check payable to: FLORIDA DEPARTMENT OF STATE	_
S70.00 Filing Fee S78.75 Filing Fee Secretificate of Status S78.75 Filing Fee Secretified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. Bhakti Marga	America			
import in langua	ration: must include the word "INCORF age as will clearly indicate that it is a co- resent. "Company" or "Co." may not be	moration instead of a natural	person or partnership if not so contained	
Bhakti Marga A	merica Corporation			
(If name unavi	ailable in Florida, enter alternate corpora	ate name adopted for the purp	pose of transacting business in Florida)	
2. Washington	ntry under the law of which it is incorpo	3.84-3980754		
4. December 13,	2019 Date of Incorporation)	5		
(I	Date of Incorporation)	(Date of	duration, if other than perpetual)	
6. May 24, 2021				
(Date first cond	ucted affairs in Florida if prior to registrat	ion. See sections 617.1501 &	617.1502, F.S. to determine penalty liabilit	y.)
a ISIS Emear S	treet, Suite 108, Bellingham, WA 98229	1		
7. 1313 Flaser 3	(Princ	ipal office street address)		
	•			
4046 N Golder	nrod Road #227, Winter Park, FL 32792			
	(Current i	mailing address, if different)		
8, Yoga and med	ation workshops			_
(Purpose(s) of	corporation authorized in home state or	country to be carried out in t	he state of Florida)	(9/1
O Name and str	eet address of Florida registered age	nt: (P.O. Box NOT accept	able)	<u>-</u>
y, (vaine and <u>ger</u>	opt minited of 1 tollida toglistores age	(* 101 001 <u>2.00 0</u>		JU#
N1	C T Corporation System		.02	2 ≥
				
Office Address:	1200 South Pine Island Road			AH 15:
	Plantation	, Florida <u>33324</u>		<u> </u>
	(City)		(Zip Code)	:
10. 70				~
Havine been na	l agent's acceptance: Imed as registered agent and to acce	ent service of process for t	he above stated corporation at the pl	ace
designated in th	is application. I hereby accept the a	ippointment as registered	agent and agree to act in this capaci	ity. I
further agree to and I am famili	comply with the provisions of all sl ar with and accept the obligations o	eatutes retative to the prop of mv position as registere	per and complete performance of my dagent.	uunes,
		J J F	J	
	C T Corporation System	Candice Pignataro		
E	By: Candice Pignataro (Reg	Assistant Secretary	6/10/2021	
	(Reg	istered agent's signature)		

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application 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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTOR	RS					
□Chairman	Name: Ann Elizabeth Winger	□Chairman	Name: Michael Goulet			
□Vice Chairman	Address: 806 6th Avenue #2	□Vice Chairman	Address: 3509 Aloma Avenue			
■ Director	Venice, CA 90291	⊠Director	Winter Park, FL 32792			
President		□President		<u> </u>		
□Vice President						
□ Secretary	□Treasurer	☐ Secretary	□Treasurer			
□Other:	Other:	Other:	Other:			
□Chairman	Name: Vesna Sanders	□Chairman	Name: Jan F	auni		
□Vice Chairman	Address: 164 Penn Lane	□Vice Chairman	Address: 5170 E Canton St.			
⊠ Director	Rochester, NY 14625	⊠Director	Long Beach, CA 90815			
□President		□President				
□Vice President		□Vice President				
⊠ Secretary	□Treasurer	☐Secretary		⊠ Treasurer		
□Other:	□ Other:	Other:		Other:		282
D CL :	N/A	□Chairman	Name: N/A			JUH 2
□Chairman =	Name: N/A				1	
□Vice Chairman	Address:	□Vice Chairman	Address:		7 (A) (A) (A)	- 를
Director		□Director		 	5.5	<u>5</u>
□President		□President				
OVice President		□Vice President				
☐Secretary	□Treasurer	☐ Secretary		□Treasurer		
DOther:	Other:	Other:		Other:		
Non-indexed indi-	t Notice: Use an attachment to report more than six viduals may be added to the index when filing your	Florida Department	of State Annual	Report form.	ourposes	only.
13. Annie	Winger (Signature of Chairman, Vice Chairman, or any of	ficer listed in number	r 12 of the applie	cation)		
14. Ann Elizabet	h Winger, President (Typed or printed name and capacity of pe			-		



Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE

OF

BHAKTI MARGA AMERICA

I CERTIFY that the records on tile in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 12/13/2019.

I FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Issued Date: 06/08/2021 UBI Number: 604 544 784

Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Kim Wyman, Secretary of State

Date Issued: 06/08/2021

