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<u> </u>			
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
, , ,			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer			
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RECEIVED 2022 MAY 10 PM 12: 4:

COVERL	EITER
TO: Registration Section Division of Corporations	
SUBJECT: Bowen Photography, Incorporated	
	n - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good Star above referenced foreign corporation to transact business.	nding" and check are submitted to register the
Please return all correspondence concerning this matter	r to the following:
Charles A Bowen	
Name of	Person
Bowen Photography, Inc.	
Firm/Coa	npany
P O Box 267	
Addı	ress
Tifton GA 31793	
City/State :	and Zip code
chip@bowenphoto.net	
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please	call:
Charles A Bowen 229	382-8277
Name of Person Area Coo	de Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:	

☐ \$78.75 Filing Fee &

□ \$87.50 Filing Fee,

Please make check payable to: FLORIDA DEPARTMENT OF STATE

\$78.75 Filing Fee &

□ \$70.00 Filing Fee

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Bowen Photography, Incorporated (Enter name of corporation; must include "INCORPORATED)," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp," "Inc." "Co," or "Corp.")	
201 Physics each. T	06.
BPI Photography, I	e adopted for the purpose of transacting business in Florida)
	58-2402463
Georgia (State or country under the law of which it is incorporated)	3. (FEI number, if applicable)
July 6, 1998 (Date of incorporation)	(Date of duration, if other than perpetual)
(Date of incorporation)	
(Day Fort two sected business	s in Florida, if prior to registration)
(Date first transacted business ISEE SECTIONS 607.1501 & 607	.1502, F.S., to determine penalty liability)
240 E 3rd Street Tifton GA 31794	
(Principal o	office street address)
P O Box 267 Tifton GA 31793	
(Current mai	iling address, if different)
(04/0//	·s 78
3. Name and street address of Florida registered agent: (F	P.O. Box NOT acceptable)
Λ . Ω	The control of th
Name: Angele Rivera	HIO 27 12
Office Address: 1891 (Apital Circ	Florida 32308 FAT 53
Office Address.	Florida 32308 (Zip code)
<u>lallahasse</u>	, Florida 5250 (Zip code)
(City)	53
	rvice of process for the above stated corporation at the place
9. Registered agent's acceptance: Having been named as registered agent and to accept se	and dorest as remistered appul and dores to act in this capacity.
designated in this application, I hereby accept the appoi	niment as registered agent and agree to be a second agent and complete performance of my duties
	niment as registered agent and agree to be a second agent and complete performance of my duties

10. 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.

A. DIRECTORS Erin Middleton Charles A Bowen □ Chairman □ Chairman P O Box 267 P O Box 267 Address: _ □ Vice Chairman □ Vice Chairman Address: Tifton GA 31793 Tifton GA 31793 ☐ Director □ Director □ President President ☐ Vice President ☐ Vice President □ Treasurer □Treasurer ■ Secretary ☐ Secretary CEO ■Other CFO □Other _____ Other _____ Name: _____ Name: _____ □ Chairman □ Chairman □ Vice Chairman Address: □Vice Chairman Address: _____ □ Director □ Director □President □President □Vice President __ □ Vice President ☐Treasurer □ Secretary □ Secretary □Treasurer □ Other _____ □Other _____ ☐Other _____ Name: _____ Name: □ Chairman □Chairman ☐ Vice Chairman Address: □Vice Chairman Address: Director □ Director □President President ☐ Vice President □ Vice President □Treasurer □ Secretary □Treasurer □ Secretary Other □Other _____ ☐ Other _____ □ Other _____ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. Charles A Bowen, President Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

Charles A Bowen, President

Control Number: K826106

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I. Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

BOWEN PHOTOGRAPHY, INC. a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business, in Georgia on the below date. 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 state.

> Docket Number : 23193637 Date Inc/Auth/Filed: 07/13/1998

Jurisdiction : Georgia

Print Date

: 05/16/2022 Form Number : 211



Brad Raffensperger

Brad Raffensperger Secretary of State