# F23000003891

(Requestor's Name)				
(Address)				
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PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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### **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: BOYLAN ENTERPRISES,	INCORPORATI	ED		
Name	of corporation	- must include suffix		
Dear Sir or Madam:				
The enclosed "Application by Foreign C "Certificate of Existence," or "Certificat above referenced foreign corporation to	e of Good Stan	ding" and check are subr		
Please return all correspondence concert	ning this matter	to the following:		
LINDA FENDER				
	Name of I	Person		
PEACHTECH ACCOUNTING SERVICES	ı			
	Firm/Com	pany		
PO BOX 1660				
	Addre	rss		
BUFORD, GA 30515				
, , , , , , , , , , , , , , , , , , ,	City/State ar	nd Zip code		
LINDA@LINDAFENDER.COM				
E-mail addre	ss: (to be used f	or future annual report n	otification)	
For further information concerning this	matter, please e	all:		
BRIDGETTE BOYLAN	770	ode) Daytime Telephone Number		
Name of Person	Area Code	Daytime Teleph	one Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration Se Division of Co P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following an Please make check payable to: FLORIDA I  S70.00 Filing Fee S78.75 Fili  Certificate	DEPARTMENT ng Fee &	OF STATE   \$78.75 Filing Fee &   Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy	

# 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.

100

under the law of which it is incorporated.

l	ERPRISES INCORPORATED		
	orporation; must include "INCORPORATED orp." "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORAT	TON,"
BB INTERIORS	S		
(If name unavail	able in Florida, enter alternate corporate name		
GEORGIA	3. 58-1681747  http://district.org/district.		
(State or countr	y under the law of which it is incorporated)	(FEI number, i	f applicable)
05/22/1986	5.	(Date of duration, if ot	
(Date	of incorporation)	(Date of duration, if ot	ner than perpetual)
06/15/2023			
	(SEE SECTIONS 607.1501 & 607.1	n Florida, if prior to registration) 502, F.S., to determine penalty lia	ability)
1000 Date Street,	Fernandina Beach FL 32034		
		ice <u>street</u> address)	
PO Box 15832, F	Fernandina Beach, FL 32035		
	(Current maili	ng address, if different)	
Name and stree	et address of Florida registered agent: (P.0	() Boy NOT acceptable)	
	Bridgette Boylan	o. Box 1401 acceptance	
Name:		<u> </u>	
Office Address:	1000 Date Street		
	Fernandina Beach	, Florida 32034 (Zip code)	<b>20</b> 7
	(City)	(Zip code)	>6 3 - 2 - 7
). Registered ag	ent's acceptance:		2 100000
laving been nam	ned as registered agent and to accept serv	ice of process for the above st	ated corporation at the place
urther agree to c	application, I hereby accept the appoint comply with the provisions of all statutes i	relative to the proper and com	igree tonget in <u>th</u> is capicity. plete performative of my duti
nd I am familiar	r with and accept the obligations of my po	osition as registered agent.	9: 23 FL
_	Bividgette Bug (Registered agent's s	flar	
	(Registered agent's s	signature)	

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

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

A. DIRECTORS	BRIDGETTE BOYLAN		KEITH BOYLAN			
□Chairman	Name:	□Chairman	Name:			
□Vice Chairman	Address: PO Box 15832	□Vice Chairman	Address: PO Box 15832			
□Director	Fernandina Beach FL 32035	□Director	Fernandina Beach FL 32035			
President		□President				
□Vice President		■ Vice President				
□Secretary	□Treasurer	□ Secretary	□Treasurer			
□Other	□ Other	∐Other	Other			
□Chairman	Name:	□ Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		□Director				
□President		□President				
□Vice President		□ Vice President				
□Secretary	□Treasurer	□Secretary	□Treasurer			
Other	□Other	□Other	Other			
□ Chairman	Name:	□ Chairman	Name:			
	Address:		Address:			
	Address.		<del></del>			
□ Director		□Director □President				
□President						
□Vice President		□ Vice President				
☐Secretary	☐ Treasurer	☐ Secretary	□Treasurer			
□Other		□Other	Other			
	Use an attachment to report more than six (6). The attace added to the index when filing your Florida Departmen					
12. Budgette Berfor 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.						
13. The idge He Touler Prosecut (Typed or printed name and capacity of person signing application)						



Control Number: J608110

## 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

#### BOYLAN ENTERPRISES, INCORPORATED

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 : 25220582 Date Inc/Auth/Filed : 05/22/1986 Jurisdiction : Georgia Print Date : 06/01/2023

Form Number : 211



Brad Raffenaperger

Brad Raffensperger Secretary of State