

Secretary of State

## OFFICE OF SECRETARY OF STATE CORPORATIONS DIVISION 2 Martin Luther King Jr. Dr. SE Suite 313 West Tower Atlanta, Georgia 30334 (404) 656-2817

sos.georgia.gov/corporations

## APPLICATION FOR CERTIFICATE OF AUTHORITY FOR FOREIGN BENEFIT CORPORATION

**IMPORTANT:** Please provide the entity's primary email address when completing this form.

Primary Email Address:\_

NOTICE TO APPLICANT: PRINT PLAINLY OR TYPE REMAINDER OF THIS FORM

1.						
	Name of Benefit Corporation			Name Reservation Number (Optional)		
	Date business commenced (or proposed to commence) in Georgia:					
2.						
	Name* of Filing Person					
	Address	City	State		Zip Code	
	Filer's Email Address	Telephone Number	ephone Number			
3.						
э.	Principal Office Mailing Address (may be P.O. Box)	City	State		Zip Code	
4.						
	Name* of Registered Agent in Georgia Register			red Agent's Email Address		
	Registered Office Street Address in Georgia (post office box or mail drop not acceptable for registered office address) GA					
	City Count			e Zip Code		
5.	Benefit Corporation's Name in State or Country of Incorporation (Must match name on certificate of existence.)	Jurisdiction (Home State or Country):		Date of Incorporation in Home Jurisdiction:		
6.	<ol> <li>The corporation certifies that it is a for-profit benefit corporation, social purpose corporation, or a substantially similar corporation, incorporated under the law in its state or country of incorporation.</li> </ol>					
7.						
	Name* of Officer / CEO Address	City		State	Zip Code	
	Name* of Officer / CFO Address	City		State	Zip Code	
	Name* of Officer / Secretary Address	Cit	у	State	Zip Code	
8.	ective Date: (Choose one) Upon filing Delayed effective date and/or time:					
9.	<ul> <li>9. NOTICE: Mail the following items to the Secretary of State at the above address.</li> <li>(1) This application;</li> <li>(2) An ORIGINAL certificate of existence or good standing, not more than 90 days old, certified by the home state or country.</li> <li>(3) Filing fee of \$235.00 (\$225 filing fee + \$10 paper filing service charge) payable to "Secretary of State." Filing fees are non-refundable.</li> <li>(4) If applicable, a copy of the resolution of the board of directors, certified by corporation's secretary, adopting a fictitious or trade name.</li> </ul>					
_	Signature of Authorized Person	Date				
-	Print Name*	_				
Signer's Capacity (check one only):						
	Officer     Chairperson of Board of Directors	Attorney-in-fact	Attorne	ey .		
	Director     Court-Appointed Fiduciary	Incorporator	Author	ized Person		

\* Enter individual's legal name, i.e. first and last name without use of initials or nicknames. Middle names or initials may be included.