



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
05/28/2002	200214402400	FICTITIOUS NAME/ORIGINAL FILING (NFO)	50.00	.00	.00	.00	.00

Receipt

This is not a bill. Please do not remit payment.

STEBELTON ARANDA & SNIDER, LPA
109 N. BROAD ST., PO BOX 130
ATTN RICK L. SNIDER
LANCASTER, OH 43130-0130

STATE OF OHIO

Ohio Secretary of State, J. Kenneth Blackwell

1320596

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

BOWMAN FARM LIMITED PARTNERSHIP

and, that said business records show the filing and recording of:

Document(s)

FICTITIOUS NAME/ORIGINAL FILING

Expiration Date: 05/24/2007

Document No(s):

200214402400

BOWMAN FARM LIMITED
PARTNERSHIP
10370 WYANDOTTE ROAD
STOUTSVILLE, OH 43154



United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of
the Secretary of State at Columbus,
Ohio this 24th day of May, A.D.
2002.

J. Kenneth Blackwell
Ohio Secretary of State



Prescribed by **J. Kenneth Blackwell**

Ohio Secretary of State

Central Ohio: (614) 466-3910

Toll Free: 1-877-SOS-FILE (1-877-767-3453)

www.state.oh.us/sos

e-mail: busserv@sos.state.oh.us

Expedite this Form: (Select One)

Mail Form to one of the Following:

☐ Yes PO Box 1390
Columbus, OH 43216

*** Requires an additional fee of \$100 ***

☐ No PO Box 670
Columbus, OH 43216

NAME REGISTRATION

(For Domestic Profit or Non-Profit)

Filing Fee \$50.00

THE UNDERSIGNED HEREBY STATES THE FOLLOWING:

(CHECK ONLY ONE (1) BOX)

(1) ☐ Trade Name (167-RNO) Date of first use _____ MM/DD/YYYY	(2) ☒ Fictitious Name (169-NFO)	(3) Name Reservation (160-NRO) ☐ Original ☐ Renewal Registration No. _____
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Complete the information in this section if box (1) or (2) is checked.

The exact name being registered or reported is

Bowman Farm Limited Partnership

The Registrant Is (Check Appropriate Box)

- | | |
|---|--|
| ☐ Individual | ☐ Foreign Corporation incorporated in the state of _____ holding Ohio license no. _____ |
| ☒ Limited Partnership: Reg. No. <u>927255</u> | ☐ Unincorporated Association |
| ☐ Ohio Limited Liability Co., Reg. No. _____ | ☐ Foreign Limited Liability Co. holding Ohio Reg. No. _____ organized in the state of _____ |
| ☐ Ohio Corporation, Charter No. _____ | |
| ☐ General Partnership | |
| ☐ Other _____ | |

The name of the registrant designated above is

Bowman Farms Limited Partnership

NOTE: Where the registrant is a partnership, the name of the partnership must appear on this line. If the registrant is a foreign corporation licensed on Ohio under an assumed name, both the assumed name and actual corporate title of such corporation must appear on this line.

The business address of the registrant is

10370 Wyandotte Road

(Street)

NOTE: P.O. Box Addresses are NOT acceptable.

Stoutsville

(City)

Fairfield

(County)

Ohio

(State)

43154

(Zip Code)

NAME OF ALL GENERAL PARTNERS

COMPLETE RESIDENTIAL ADDRESSES (including zip code)

NOTE: Pursuant to OAG 89-081, if a general partner is a foreign (out-of-state) corporation, it must be licensed to transact business in Ohio; if a general partner is a foreign corporation licensed in Ohio under an assumed name, please note both the assumed name and actual corporate title of such general partner.

The nature of the business conducted by the registrant under the trade or fictitious name is (please be specific)

farming

Complete the information in this section if box (3) is checked.

- ☐ Please reserve the name listed below. (only one name per form)
- ☐ Please reserve the first name available in the order of my preference.

I understand that I am not guaranteed the reservation UNTIL I RECEIVE WRITTEN CONFIRMATION FROM THE SECRETARY OF STATE'S OFFICE STATING THAT THE NAME HAS BEEN REGISTERED TO ME.

The name reservation is valid for a period of 180 days.

(First Choice)

(Second Choice)

(Third Choice)

(Applicant)

(Print Name)

(Address)

(City, State and Zip Code)

Must be authenticated by an authorized representative

Barbara W. Bowman

Authorized Representative
Barbara W. Bowman

Authorized Representative

May 3, 2002

Date _____

Date _____