

F0200000 2638

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Nicks Equine Service, Inc.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Jeremy J. Deters 400005578024--1
-05/22/02--01007--002
*****70.00 *****70.00
(Name of Person)
Deters, Benzinger & LaVelle
(Firm/Company)
2701 Turkeyfoot Road
(Address)
Covington, KY 41017
(City/State and Zip code)

For further information concerning this matter, please call:

Jeremy Deters at (859) 341-1881
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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TALLAHASSEE, FLORIDA

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

THOMAS

5/29

**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.*

1. Nicks Equine Service, Inc.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Indiana 3. 75-3015404
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. March 14, 2002 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. upon qualification
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 6995 Old Lanesville Road, Georgetown, Indiana 47122
(Principal office address)
6995 Old Lanesville Road, Georgetown, Indiana 47122
(Current mailing address)
8. All purposes permitted by Florida statutes
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)
Name: Judy Nicks
Office Address: 3136 Hollywood Blvd.
Hollywood, Florida 33021
(City) (Zip code)

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10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Judy Nicks
(Registered 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. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Ralph Nicks

Address: 6995 Old Lanesville Road
Georgetown, IN 47122

Vice Chairman: Judy Nicks

Address: 3136 Hollywood Blvd.
Hollywood, FL 33021

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Ralph Nicks

Address: 6995 Old Lanesville Road
Georgetown, IN 47122

Vice President: _____

Address: _____

Secretary: Judy Nicks

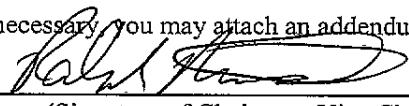
Address: 3136 Hollywood Blvd.

Treasurer: Hollywood, FL 33021

Address: _____

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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Ralph Nicks, President
(Typed or printed name and capacity of person signing application)

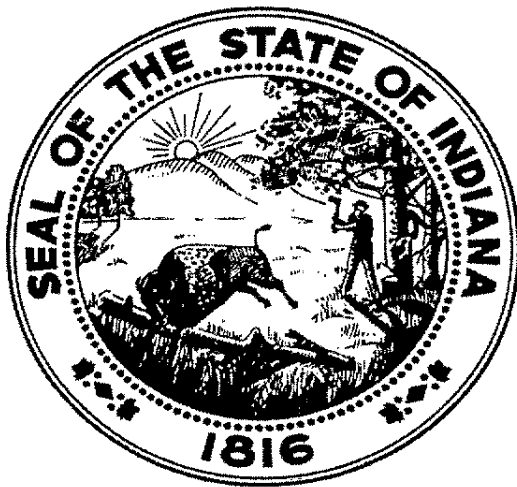
**State of Indiana
Office of the Secretary of State**

**CERTIFICATE OF INCORPORATION
of
NICKS EQUINE SERVICE, INC.**

I, SUE ANNE GILROY, Secretary of State of Indiana, hereby certify that Articles of Incorporation of the above For-Profit Domestic Corporation have been presented to me at my office, accompanied by the fees prescribed by law and that the documentation presented conforms to law as prescribed by the provisions of the Indiana Business Corporation Law.

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NOW, THEREFORE, with this document I certify that said transaction will become effective Thursday, March 14, 2002.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, March 14, 2002.

Sue Anne Gilroy

SUE ANNE GILROY,
SECRETARY OF STATE