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B. MeKnight DEC 15 2006

W0652710

COVER LETTER

Division of Corporations
SUBJECT: Blue Skies, 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:
Scott Brogan
(Name of Person)
Blue Skies, Inc.
(Firm/Company)
15 Paradise Plaza #269
(Address)
Sarasota, FL 34239
(City/State and Zip code)
For further information concerning this matter, please call:
Coott Progon 054 000 0477
Scott Brogan at (254) 338-0177
(Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: MAILING ADDRESS:
New Filing Section New Filing Section
Division of Corporations Division of Corporations
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314
2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301
Enclosed is a check for the following amount:
▼ \$70.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fee & \$87.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy



December 6, 2006

SCOTT BROGAN 15 PARADISE PLAZA #269 SARASOTA, FL 34239

SUBJECT: CLEAR BLUE SKIES, INC.

Ref. Number: W06000052710

We have received your document for CLEAR BLUE SKIES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The alternate name you listed is unavailable. Please select another name and resubmitt.,

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6931.

Letter Number: 306A00069890

Becky McKnight Document Specialist New Filing Section

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. Blue Skie				
(Enter name of c	orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	ED," "COMPANY," "CORPORATION,"		
	d Blue Skies, Inc.			
•		me adopted for the purpose of transacting busines	s in Florida)	
		_{3.} <u>20-5731012</u>		
` •	under the law of which it is incorporated)	(FEI number, if applicable)		
4. August 27, 2004 _{5.} perpetual				
(Date	of incorporation)	(Duration: Year corp. will cease to exist or	'perpetual")	
6				
		ss in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)		
7. 15 Parad	ise Plaza #269, Sarasot	ta, FL 34239		
	. (Principal office a	nddress)		
15 Parad	ise Plaza #269, Sarasot	ta, FL 34239		
	(Current mailing a	address)		_
。Investme	nt Services or any lawfu	ıl husiness nurnose	ASS SEC	06 0
		country to be carried out in state of Florida)		DEC 1
9. Name and stree	t address of Florida registered agent: (1	P.O. Box NOT acceptable)	HASSEE.	S
Name:	Scott Brogan			AH IO:
Office Address:	15 Paradise Plaza #26	9	TAIR	: 57
	Sarasota	, Florida 34239		
	(City)	(Zip code)		
Having been name designated in this further agree to co	application, I hereby accept the appoin	rvice of process for the above stated corpora ntment as registered agent and agree to act i s relative to the proper and complete perforn position as registered agent.	n this capaci	ity. I

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.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: ______ Address: Vice Chairman: Address: _____ Address: Director: ___ Address: __ **B. OFFICERS** President: Scott Brogan Address: 15 Paradise Plaza #269 Sarasota, FL 34239 Vice President: Secretary: Address: ___

Address:

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

13. Signature of Director or Officer listed in number 12 of the application)

14. (Typed or printed name and capacity of person signing application)

STATE OF



NEBRASKA

United States of America, State of Nebraska

ss.

Department of State Lincoln, Nebraska

I, John A. Gale, Secretary of State of Nebraska-do hereby certify;

EBLUESKIES, INC.

was duly incorporated under the laws of this state on August 27, 2004 and do further certify that no occupation taxes assessed are unpaid and no biennial reports are delinquent; articles of dissolution have not been filed and said corporation is in existence as of the date of this certificate.

In Testimony Where

WARCH 1ST 18

Thave hereunto set my hand and affixed the Great Seal of the State

SECRETARY OF STATE

DEC 15 MM ID: 5

This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's financial condition or business activities and practices.