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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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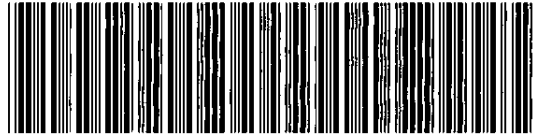
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

B. McKnight APR 30 2009

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** SKIPPER DICKS, INC.

(Name of Corporation – must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

JOHN M. WICKER, ESQ.

(Name of Person)

COSTELLO, ROYSTON & WICKER, LLP

(Firm/Company)

12670 NEW BRITTANY BLVD

SUITE 101

(Address)

FORT MYERS, FL 33907

(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN M. WICKER, ESQ.

(Name of Person)

at ( 239 ) 939-2222 x4265

(Area Code & Daytime Telephone Number)

**MAILING ADDRESS:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO  
CONDUCT ITS AFFAIRS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS  
IN THE STATE OF FLORIDA:*

1. SKIPPER DICKS, INC.

(Name of corporation: must include the word "INCORPORATED" or "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. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

2. CALIFORNIA

(State or country under the law of which it is incorporated)

3. 26-3994189

(FEI number, if applicable)

4. 01/05/2009

(Date of Incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. Not Applicable

(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 2104 WEST FIRST ST., APT. 1003, FORT MYERS, FL 33901

(Principal office address)

C/O JOHN M. WICKER, PO BOX 60205, FORT MYERS, FL 33906

(Current mailing address)

8. PUBLIC INTEREST GROUP

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: JOHN M. WICKER, ESQ.

Office Address: 12670 NEW BRITTANY BLVD, STE 101

FORT MYERS

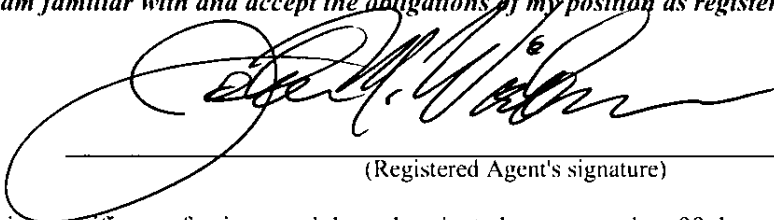
(City)

, Florida 33907

(Zip Code)

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.*



(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.

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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

12. Names and addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: RICHARD PAUL

Address: 2104 WEST FIRST ST., APT. 1003, FORT MYERS, FL 33901

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: RICHARD PAUL

Address: 2104 WEST FIRST ST., APT. 1003, FORT MYERS, FL 33901

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: RICHARD PAUL

Address: 2104 WEST FIRST ST., APT. 1003, FORT MYERS, FL 33901

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

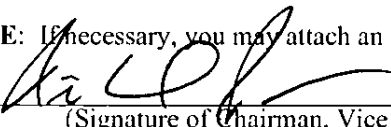
Secretary: RICHARD PAUL

Address: 2104 WEST FIRST ST., APT. 1003, FORT MYERS, FL 33901

Treasurer: RICHARD PAUL

Address: 2104 WEST FIRST ST., APT. 1003, FORT MYERS, FL 33901

**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. RICHARD PAUL President  
(Typed or printed name and capacity of person signing application)

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CLERK OF DISTRICT COURT  
FORT MYERS, FLORIDA

**State of California**  
**Secretary of State**

**CERTIFICATE OF STATUS**

ENTITY NAME:

SKIPPER DICKS INC.

FILE NUMBER: C3177259  
FORMATION DATE: 01/05/2009  
TYPE: DOMESTIC NONPROFIT CORPORATION  
JURISDICTION: CALIFORNIA  
STATUS: ACTIVE (GOOD STANDING)

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OFFICE OF THE SECRETARY OF STATE  
SACRAMENTO, CALIFORNIA

I, DEBRA BOWEN, Secretary of State of the State of California,  
hereby certify:

The records of this office indicate the entity is authorized to exercise  
all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial  
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate  
and affix the Great Seal of the State of  
California this day of April 21, 2009.

*Debra Bowen*

**DEBRA BOWEN**  
Secretary of State