

To: The Florida Dept. of State
Subject: 00638.118409

From: Ashley Smith

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Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : CORPDIRECT AGENTS, INC.
Account Number : 110450000714
Phone : (850) 222-1173
Fax Number : (850) 224-1640

000638.118409

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION
CHECKERS CAPITAL, INC.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Help

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TALLAHASSEE, FLORIDA

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Checkers Capital, LLC
209 Bermuda Lane
Palm Beach, FL 33480

January 22, 2010

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

Re: Consent by Checkers Capital, LLC
For Use of Name
Checkers Capital, Inc.

Dear Madam/Sir:

The undersigned is the sole member of Checkers Capital, LLC, a Florida limited liability company formed on December 3, 2009, Document No. L09000115148.

Checkers Capital, Inc. is a Delaware corporation (the "Corporation") formed on January 4, 2010, Delaware File No. 4773150. I am President and Secretary of the Corporation and hereby grant consent to the Corporation to use the name Checkers Capital, Inc. in the State of Florida.

Please feel free to contact me directly should you have any questions regarding this matter. Thank you.

Very Truly Yours,

Checkers Capital, LLC

By: 

Name: Nicholas Coleman
Title: Sole Member

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**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. CHECKERS CAPITAL, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. DELAWARE

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

3. 27-1613521

(FEI number, if applicable)

4. JANUARY 4, 2010

(Date of incorporation)

5. PERPETUAL

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

6. THE COMPANY HAS NOT YET TRANSACTED BUSINESS IN FLORIDA

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 209 BERMUDA LANE, PALM BEACH, FL 33480

(Principal office address)

209 BERMUDA LANE, PALM BEACH, FL 33480

(Current mailing address)

8. PROVIDE FINANCIAL SERVICES.

(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 NOT acceptable)

Name: **NATIONAL CORPORATE RESEARCH, LTD.**

Office Address: **515 EAST PARK AVENUE**

TALLAHASSEE, Florida **32301**

(City) (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.

Rose Marie Cole, Not. Sec.
(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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: NICHOLAS A. COLEMAN

Address: 209 BERMUDA LANE, PALM BEACH, FL 33480

Director: JUSTIN M. FARLEY

Address: 209 BERMUDA LANE, PALM BEACH, FL 33480

B. OFFICERS

President: NICHOLAS A. COLEMAN

Address: 209 BERMUDA LANE, PALM BEACH, FL 33480

Vice President: _____

Address: _____

Secretary: NICHOLAS A. COLEMAN

Address: 209 BERMUDA LANE, PALM BEACH, FL 33480

Treasurer: JUSTIN M. FARLEY

Address: 209 BERMUDA LANE, PALM BEACH, FL 33480

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. NICHOLAS A. COLEMAN, PRESIDENT

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

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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CHECKERS CAPITAL, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF JANUARY, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CHECKERS CAPITAL, INC." WAS INCORPORATED ON THE FOURTH DAY OF JANUARY, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

APPROVED
AND
FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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You may verify this certificate online
at corp.delaware.gov/authvar.shtml


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 7771574

DATE: 01-21-10

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