F14 00000 2778

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP	☐ WAIT	MAIL					
(Bu	isiness Entity Nam	ne)					
(Do	ocument Number)						
Certified Copies	_ Certificates	of Status					
Special Instructions to Filing Officer:							

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Hackleman, Olive Judd, P.A.

June 24, 2014

Via Federal Express

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

RE: Applications to Transact Business in Florida for Clark Dickson, Inc., and Dickson Family Enterprises, Ltd..

To whom it may concern,

Enclosed please find an Application by Foreign Corporation for Authorization to Transact Business in Florida for Clark Dickson, Inc., along with a check in the amount of Seventy Eight and (75/100) Dollars (\$78.75).

Also enclosed is an Application by Foreign Limited Partnership or Limited Liability Limited Partnership to Transact Business in Florida for Dickson Family Enterprises, Ltd., along with a check in the amount of One Thousand and Eight and (75/100) Dollars (\$1,008.75).

Please note the Application for Clark Dickson, Inc. is to be filed prior to the Application for Dickson Family Enterprises, Ltd.

If you have any questions, please let me know. Thank you.

Very Truly Yours,
Middle aug

Nicole M. Cauz, Esq.

Enc.

COVER LETTER

	Filing Sec							
SUBJECT:	~ ! !	Dickson, Inc.						
Name of corporation - must include suffix								
Dear Sir or M	ladam:							
"Certificate o	f Existenc	ion by Foreign Corporation e," or "Certificate of Good n corporation to transact b	Standing"	and check are sul				
Please return	all corresp	ondence concerning this m	atter to the	following:				
Lawren	ce Cla	rk Dickson						
		Nam	e of Person					
			Company					
6 Santa	Domi	ngo Court						
			Address					
Odessa	, TX 7	9765						
	O !! .		ate and Zip	code				
caickson	@aick	sonprocess.com	1 5 5 4-		126			
		E-mail address: (to be u	sea for futu	re annuai report	notification)			
For further in	formation	concerning this matter, ple	ase call:					
Anne C.		at (_ 432		38-2800				
Nam	e of Persor	n A	rea Code &	Daytime Teleph	ione Number			
STRI	EET/COU	RIER ADDRESS:		MAILING A	DDRESS:			
New Filing Section			New Filing Section					
Division of Corporations Clifton Building			Division of Corporations					
		g Center Circle		P.O. Box 632' Tallahassee, F				
	hassee, FL			runanassee, r	L 32314			
Enclosed is a	check for t	the following amount:						
□ \$70.00 Fil	ing Fee	■ \$78.75 Filing Fee & Certificate of Status		5 Filing Fee & fied Copy	□ \$87.50 Filing Fee, Certificate of Status & Certified Copy			

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.

	corporation; must include "INCORPORAT Corp," "Inc," "Co," or "Corp.")	ED,'	"COMPANY," "CORPORATION,"				
(If name unavail	able in Florida, enter alternate corporate na	.me :	adopted for the purpose of transacting busine	ss in Florida	a)		
(State or country	y under the law of which it is incorporated)	(FEI number, if applicable))			
4. <u>6-25-2012</u>		5.	Perpetual				
(Date	e of incorporation)	(Duration: Year corp. will cease to exist or	"perpetual"	")			
6	/Data Fast transported having		Florida, if prior to registration)				
			602, F.S., to determine penalty liability)				
₇ 6 Santa D	omingo Court Odessa,	Те	xas 79765		g		
,· <u> </u>	(Principal office			<u>~</u>	-SEC		
Same				₩ 	0 X		
	(Current mailing	addı	ress)	က်			
				7	중유		
8. Name and street	et address of Florida registered agent:	(P.C	D. Box NOT acceptable)	\$ † \$	STA		
Name:	Drake Batchelder			Č	SWO!		
Office Address:	728 Old Loggers Way						
	St. Augustine		, Florida 32086				
	(City)		(Zip code)				
	ed as registered agent and to accept s		ce of process for the above stated corpo nent as registered agent and agree to ac				

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)

10. 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.

11. Names'and business addresses of officers and/or directors: A. DIRECTORS Chairman: ____ Vice Chairman: Address: ___ Director: Lawrence Clark Dickson Address: 6 Santa Domingo Court Odessa, TX 79765 Director: Anne C. Dickson Address: 6 Santa Domingo Court Odessa, TX 79765 **B. OFFICERS** President: Lawrence Clark Dickson Address: 6 Santa Domingo Court Odessa, TX 79765 Vice President: Address: Secretary: Anne C. Dickson Address: 6 Santa Domingo Court, Odessa, TX 79765 Treasurer: Address: _____ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Lawrence Clark DicksonatuFres Diector or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. 13. <u>Lawrence Clark Dickson, President</u>

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

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



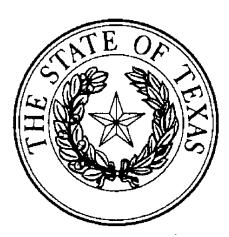
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for CLARK DICKSON, INC. (file number 801617332), a Domestic For-Profit Corporation, was filed in this office on June 25, 2012.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on June 21, 2014.



NANDITA BERRY

Nandita Berry Secretary of State

TID: 10264

Dial: 7-1-1 for Relay Services Fax: (512) 463-5709 Document: 550116910003

Phone: (512) 463-5555 Prepared by: SOS-WEB