

F14000003546

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

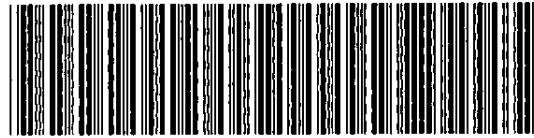
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Certified Copies _____ Certificates of Status _____

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FLORIDA FILING & SEARCH SERVICES, INC.

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PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 8/20/14

NAME: CHARITY SERIES OF POKER INC.

TYPE OF FILING: APPLICATION

COST: 70.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

Abbie Hodge

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: CHARITY SERIES OF POKER 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", or "Certificate of Status" 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:

Bob Wiktozak

Name of Person

Bay State Corporate Services, Inc.

Firm/Company

6 Beacon Street, Suite 510

Address

Boston, MA 02108

City/State and Zip Code

aaron@zeidlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bob Wiktozak

Name of Person

at (617) 742-8484

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:

- | | | | |
|--|--|---|---|
| <input checked="" type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &
Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee,
Certificate of Status &
Certified Copy |
|--|--|---|---|



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 21, 2014

FLORIDA FILING & SEARCH SERVICES, INC/ ABBIE

SUBJECT: CHARITY SERIES OF POKER INC.
Ref. Number: W14000051179

We have received your document for CHARITY SERIES OF POKER INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The registered agent must sign accepting the designation.

Please return the corrected 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) 245-6052.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 914A00017986

**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. CHARITY SERIES OF POKER 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.)

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

2. ILLINOIS 3. 47-1211817
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 06/26/14 5. perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 100 TRISTATE INTL, SUITE 128, LINCOLNSHIRE, IL 60069
(Principal office address)

100 TRISTATE INTL, SUITE 128, LINCOLNSHIRE, IL 60069
(Current mailing address)

8. Organize and promote charity poker tournaments and other events that raise money and awareness for worthy charities and causes.
(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)

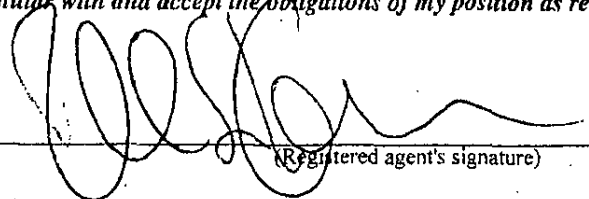
Name: Randall S. Kasper, Esq.

Office Address: 3708 Berenstain Drive

Saint Augustine, Florida 32092
(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.


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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A. DIRECTORS [Please also see attached Addendum.]

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Matt Savage

Address: 6648 Samba Avenue

Las Vegas, NV 89139

Director: Matthew Stout

Address: 3518 Bella Valencia Court

Las Vegas, NV 89141

B. OFFICERS [Please also see attached Addendum.]

President: Matthew Stout

Address: 3518 Bella Valencia Court

Las Vegas, NV 89141

Vice President: Michael Frazin

Address: 450 Village Green South #413

Lincolnshire, IL 60069

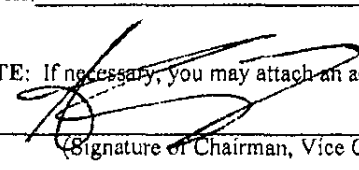
Secretary: Matt Savage

Address: 6648 Samba Avenue, Las Vegas, NV 89139

Treasurer: Michael Frazin

Address: 450 Village Green South #413, Lincolnshire, IL 60069

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. Aaron M. Zeid, Asst. Secretary
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CHARITY SERIES OF POKER INC.

ADDENDUM LISTING ADDITIONAL

OFFICERS & DIRECTORS

DIRECTOR: Michael Frazin - 450 Village Green South #413, Lincolnshire, IL 60069

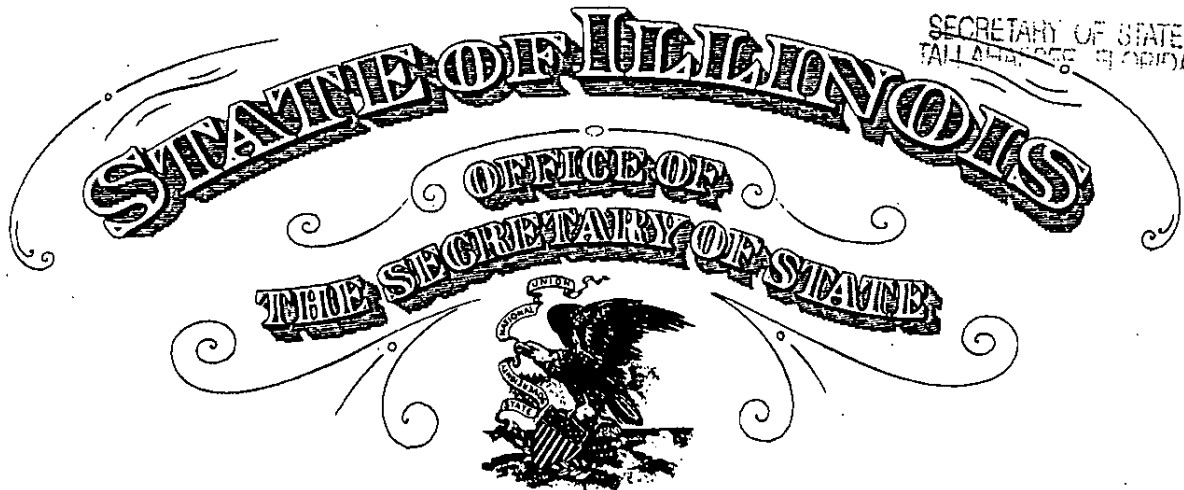
OFFICER: Asst. Secretary: Aaron M. Zeid - 100 Tristate Intl, Suite 128, Lincolnshire, IL 60069

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File Number

6953-553-4

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To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

CHARITY SERIES OF POKER, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JUNE 26, 2014, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



Authentication #: 1423102648

Authenticate at: <http://www.cyberdriveillinois.com>

*In Testimony Whereof, I hereto set
my hand and cause to be affixed the Great Seal of
the State of Illinois, this 19TH
day of AUGUST A.D. 2014.*

Jesse White

SECRETARY OF STATE