

P20199

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

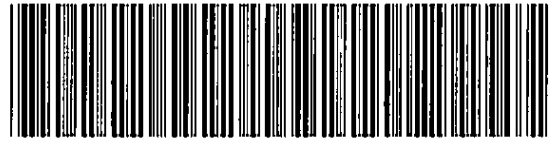
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500340357045

02/07/20--01004--022 **52.50

FILED
2020 MAR 16 PM 2:00
SECURITY
FBI ALBANY

Amend/cc
ccus

MAR 17 2020
ALBRITTON



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 4, 2020

TRACI RIPLEY
3100 MONTICELLO
STE. 350
DALLAS, TX 75205

SUBJECT: CLICKS BUTLER, INC.
Ref. Number: P20199

We have received your document for CLICKS BUTLER, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Profit Corporation, but your entity is a Foreign Profit Corporation. Please complete and return the enclosed blank form(s).

Please return 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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 320A00004786

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: **Clicks Butler, Inc.**

Name of Corporation

DOCUMENT NUMBER: **P20199**

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Traci Ripley

Name of Contact Person

Clicks Billiards

Firm/Company

3100 Monticello, Ste 350

Address

Dallas, TX 75205

City/State and Zip Code

triple@clicks.com

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

For further information concerning this matter, please call:

Traci Ripley

Name of Contact Person

at (**214**) **599-2985**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy

☒ \$52.50 Filing Fee,
Certificate of Status &
Certified Copy

No check is enclosed because you already have our check that was mailed with the wrong amendment form.

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

P201999

(Document number of corporation (if known))

1. Clicks Butler, Inc.
(Name of corporation as it appears on the records of the Department of State)
2. Texas 3. 7/25/88
(Incorporated under laws of) (Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? _____
5. _____
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

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

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

9. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

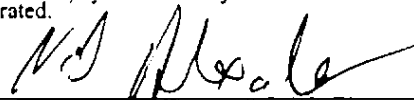
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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2020 MAR 16 PM 2:00
SECRET
NOT REPRODUCIBLE

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Secretary	John B. Peyton	4325 Caruth Blvd.	<input checked="" type="checkbox"/> Add
		Dallas, TX 75225	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.



(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

A. Nicholas Alexander

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE \$35.00