F2300001789

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
1 Copies Certificates of Status
(a) Instructions to Filing Officer:

Office Use Only



000405482810

2023 HAR 28 PH 8: 56



KNU S & SOLS



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 866.625.0838 COGENCYGLOBAL.COM

Account#: I20000000088

Date: March 28, 2023	ACCOUNT#. 120000000000
Name: James Brodbeck	
Reference #:1936429	
Entity Name: BETTER THAN VEGAS, INC.	
✓ Articles of Incorporation/Authorization to Transact Busin	ess
Amendment	
Change of Agent	
Reinstatement	
Conversion	
Merger	
☐ Dissolution/Withdrawal	
Fictitous Name	
Other	
Authorized Amount:\$70.00	
Signature:	

COVER LETTER

TO:	Registration Section Division of Corpor			
SHRI	JECT:	Better T	han Vegas, Inc.	
., () 13.1		Name of corporation	- must include suffix	
Dear S	Sir or Madam:			
"Certi	ficate of Existence,"	by Foreign Corporation for A or "Certificate of Good Stand orporation to transact busines	ling" and check are submitt	usiness in Florida." ed to register the
Please	return all correspond	lence concerning this matter	to the following:	
		Jason Ki	ng	
		Name of F	'erson	
		Better Than Ve	egas, Inc	
		Firm/Comp	pany	
		303 Cloverle	eaf Ln	
	, <u></u>	Addre	SS	
		Severna Park N	ND 21146	
		City/State an	d Zip code	
		jason.king@bette	*	
	į	E-mail address: (to be used for	or future annual report notif	ication)
For fu	rther information cor	cerning this matter, please ca	ill:	
	Jason King	at (410	_)212-0997	
	Name of Person	Area Code	Daytime Telephon	e Number
	STREET/COURI Registration Section Division of Corpor The Centre of Talla 2415 N. Monroe St Tallahassee, FL 32	n ations ihassee .reet, Suite 810	MAILING ADD Registration Secti Division of Corpo P.O. Box 6327 Tallahassee, FL	on orations
Please		: FLORIDA DEPARTMENT		\$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.

	e in Florida, enter alternate corporate name	•	-	
	Delaware 3. Inder the law of which it is incorporated)	87-1367816		
(State or country t	inder the law of which it is incorporated)	(FEI number, if applicable)		
	6/2/2021 5.			
(Date of	incorporation)	(Date of duration, if other	than perpetual)	
	January 1, 2023			
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15		lity)	
	303 Cloverleaf Ln, Severna Park MD 21146			
		e street address) g address, if different)		
. Name and <u>street</u> :	address of Florida registered agent: (P.C	. Box <u>NOT</u> acceptable)	023 HAR	
Name:	Cogency Global Inc.			
Office Address:	115 North Calhoun Street, Suite 4		· 2	
	Tallahassee, Florida	. Florida 32301 (Zip code)	- : 8:	
	(City)	(Zip code)	. CD	

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.

(Registered agent's signature)

A. DIRECTORS Jason King □ Chairman Name: _____ **⊠**Chairman 303 Cloverleaf Ln □ Vice Chairman Address: □ Vice Chairman Address: __ Severna Park MD 21146 □ Director □ Director □President □ President ☐ Vice President □Vice President _____ Treasurer □Treasurer □ Secretary □ Secretary □Other _____ □Other ____ □Other _____ □Other _____ □ Chairman Name: □Chairman Name: _____ □Vice Chairman Address: □ Vice Chairman Address: _____ □ Director □ Director □President □ President ☐ Vice President □Vice President _____ □Treasurer ☐ Secretary □ Treasurer □ Secretary □Other _____ □Other ____ ☐Other _____ □Other_____ Name: _____ Name: □ Chairman ☐ Chairman Address: _____ □ Vice Chairman □Vice Chairman Address: _____ □Director □ Director □President □ President ☐ Vice President □ Treasurer □ Secretary □ Secretary □Treasurer □Other _____ □Other _____ □Other _____ □Other _____ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 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. Jason King - Chairman

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

<u>Delaware</u>

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE CERTIFICATE OF INCORPORATION

OF "BETTER THAN VEGAS, INC.", WAS RECEIVED AND FILED IN THIS OFFICE

THE SECOND DAY OF JUNE, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION

REMAINS A DOMESTIC CORPORATION ON OUR RECORDS BUT HAS FAILED TO

FILE THE ANNUAL FRANCHISE TAX REPORT AND PAY THE FRANCHISE TAXES

CURRENTLY DUE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BETTER THAN VEGAS, INC." WAS INCORPORATED ON THE SECOND DAY OF JUNE, A.D. 2021.



Jeffrey W. Bullocs, Secretary of State

Authentication: 202932179