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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)617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)205-8842
Fax Number : (850)878-5368

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
GAMER PACKAGING, INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

16 SEP -17 AM 11:29
FILED
TALLAHASSEE, FLORIDA

07:1 AM 7-25-2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Gamer Packaging, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Laurie J. Crowell

	Name of Person
Faegre Baker Daniels LLP	
	Firm/Company
90 South 7th Street, #2200	
	Address
Minneapolis, MN 55402	
	City/State and Zip code
tkraus@gamerpackaging.com	
	E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Laurie J. Crowell	612	766.8664
	at ()	
Name of Person	Area Code	Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified 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.

Gamer Packaging, Inc.

1. _____
(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. Minnesota _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 1/4/1990 _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 330 2nd Avenue South #895, Minneapolis, MN 55401
(Principal office address)

(Current mailing address, if different)

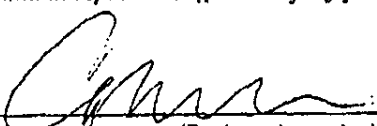
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CT Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(City) (Zip code)

16 SEP -7 AM 11:23
CLASSIFIED, FLORIDA

9. 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.


Cristle Myers
Assistant Secretary
(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: Ronald N. Gamer
Address: 330 2nd Avenue South #895, Minneapolis, MN 55401

Vice Chairman: N/A
Address: _____

Director: Kenneth S. Gamer
Address: 330 2nd Avenue South #895, Minneapolis, MN 55401

Director: _____
Address: _____

B. OFFICERS

President: Kenneth S. Gamer
Address: 330 2nd Avenue South #895, Minneapolis, MN 55401

Vice President: N/A
Address: _____

Secretary: Paula Gamer
Address: 330 2nd Avenue South #895, Minneapolis, MN 55401

Treasurer: Timoth V. Kraus
Address: 330 2nd Avenue South #895, Minneapolis, MN 55401

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. [Signature]
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.

13. Timothy V. Kraus CFO Treasurer
(Typed or printed name and capacity of person signing application)

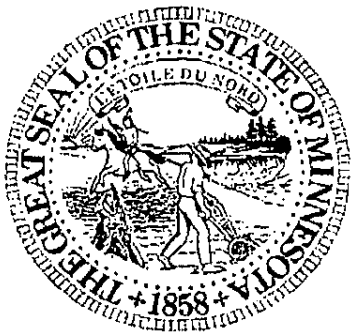
16 SEP 7 AM 11:23
ADMITTED TO ROOM

**Office of the Minnesota Secretary of State
Certificate of Good Standing**

I, Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name: Gamer Packaging, Inc.
Date Filed: 01/04/1990
File Number: 6N-513
Minnesota Statutes, Chapter: 302A
Home Jurisdiction: Minnesota

This certificate has been issued on: 09/07/2016



Steve Simon

Steve Simon
Secretary of State
State of Minnesota