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Tol

Division of Corporations

Fax Number

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From:

Account Name

: ALLSTATE CORPORATE SERVICES CORP

Account Number : 120040000031 Phone

: (800)906-9220

Fax Number

: (800)906-9880

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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FOREIGN PROFIT/NONPROFIT CORPORATION

Integrated Financial Services Inc.

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\$78.75

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DEC 0 6 2016 Help

O SIMMONS

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.

(If name unavail	·	me adopted for the purpose of transacting business in Flo	orida)		
, -	under the law of which it is incorporated)	(FEI number, if applicable)			
4/28/201	4	PERPETUAL			
UPON R	e of incorporation) ECEIPT	(Duration: Year corp. will cease to exist or "perpet	rual")		
15 Grame	ercy Park South #5D, Net (Principal office a				
15 Grame	rcy Park South #5D, New	York NY 10003			
15 Grame	rcy Park South #5D, New (Current mailing a				
			16 DEC		
Gaming	(Current mailing a		16 DEC -5		
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Gaming (Purpose(i	(Current mailing addevelopment) of corporation authorized in home state or		16 DEC -5 AH 11:		
Gaming (Purpose(i Name and green Name:	(Current mailing and Courrent	country to be carried out in state of Florida) P.O. Box NOT acceptable) s, Inc.	16 DEC -5 AM 11: 04		
Gaming (Purpose(i	(Current mailing and Courrent		16 DEC -5 AM 11: 04		

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.

12. Names and business addresses of officers and/or directors:	
A. DIRECTORS	
Chairman: Blaine Goldman	
Address: 15 Gramercy Park South #5D	
New York NY 10003	
Vice Chairman:	
Address:	,
	
Director:	
Address;	
	•
Director:	
Address:	2-0.
B. OFFICERS	F DD
President: Blaine Goldman	5 F
Address: 15 Gramercy Park South #5D	
New York NY 10003	
Vice President:	# #
Address:	
Secretary:	
Address:	
Treasurer:	
	u d'en dinasteur
NOTE: If necessary, you may attach an addendum to the application listing additional officers a	nator directors.
13. Signature of Director or Officer	
The officer or director signing this document (and who is listed in number 12 above) affirms that are true and that he or she is aware that false information submitted in a document to the Departm	
a third degree felony as provided for in s.817.155, P.S. Blaine Goldman President	

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "GAMECO, INC." IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE SECOND DAY OF DECEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GAMECO, INC."

WAS INCORPORATED ON THE TWENTY-EIGHTH DAY OF APRIL, A.D. 2014.

AND I DO HEREDY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

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Authentication: 203434824

Date: 12-02-16

5524080 8300 SR# 20166879458

You may verify this certificate online at corp.delaware.gov/authver.shtml