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Account#: 12000000088

Date: 03	3/17/2021	
Name:	Merritt Walker	
Reference #:	1341637	
	HIDDEN	LEAF GAMES, INC.
	of Incorporation/Authorizati	on to Transact Business
	nent	
🗌 Change	of Agent	
Reinstal	ement	
Convers	ion	
Merger		
Dissolut	ion/Withdrawal	
Fictitiou	s Name	
🖌 Other	CERTIFIED C	OPY OF THE FILING EVIDENCE
Authorized Am	ount: \$78.75	
Signature:		

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COVER LETTER

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TO: Registration Section Division of Corporations

SUBJECT: Hidden Leaf Games, 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:

Bao Lam

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Name	of Person
Hidden Leaf Games. Inc.	
Firm/C	Company
5900 Canterbury Dr. A309	
A	ddress
Culver City, CA 90230	
Citv/Sta	te and Zip code
- bao@hiddenleafgames.com	
E-mail address: (to be us	ed for future annual report notification)
For further information concerning this matter, plea	se call:
Ronnie Roy 424	442-9287
Name of Person Area C	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMF \$70.00 Filing Fee \$2503 Certificate of Status	CNT OF STATE ☑ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certified Copy 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.

Hidden Leaf Games, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co," or "Corp.")

Delaware		3.		
(State or countr	y under the law of which it is incorporated)	(FEI number, if ap	(FE1 number, if applicable)	
March 5, 2020	:	5		
(Date	of incorporation)	(Date of duration, if other	than perpetual)	
)				
		in Florida, if prior to registration) 1502, F.S., to determine penalty liabili	ty)	
5900 Canterbury	Dr. A309, Culver City, CA 90230			
- <u></u>	(Principal o	ffice street address)		
			202	
	(Current mai	ling address, if different)	HAR	
Name and stree	et address of Florida registered agent: (P	.O. Box <u>NOT</u> acceptable)		
Name:	Alex Brown		01 HV	
Office Address:	3026 Trinity Cottage Dr		0:28	
	Land o Lakes	, Florida ³⁴⁶³⁸		
	(City)	(Zip code)		

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.

(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.

A. DIRECTORS

□Chairman	Bao Lam Name:	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
Director	Culver City, CA 90230	Director	
President		□President	
□Vice President		□Vice President	
□Secretary	Treasurer	Secretary	□Treasurer
Other	Other	Other	Other
Chairman	Name:	□ Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
Director	New York, NY 10019	Director	
President		□President	
□Vice President		□Vice President	
Secretary	Treasurer	Secretary	Treasurer
CEO	Other	□Other	Other
□Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
Director		Director	
President		□President	
□Vice President		□Vice President	
□Secretary	Treasurer	□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 12. ____

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. Bao Lam, President

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HIDDEN LEAF GAMES, 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 SIXTEENTH DAY OF MARCH, A.D. 2021.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HIDDEN LEAF GAMES, INC." WAS INCORPORATED ON THE FIFTH DAY OF MARCH, A.D. 2020.

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



Jeffrey W. Bullock, Secretary of State

Authentication: 202748190

Date: 03-16-21

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SR# 20210932993 You may verify this certificate online at corp.delaware.gov/authver.shtml