

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000252416 3)))



H210002524163ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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

FOREIGN PROFIT/NONPROFIT CORPORATION ESPORTS ENTERTAINMENT GROUP, INC.

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$78.75

2021 JUH 28 AH 9: 33

Electronic Filing Menu

Corporate Filing Menu

Help

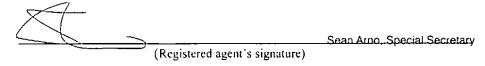
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

(Enter name of c	ERTAINMENT GROUP, INC. orporation; must include "INCORPORATED," "orp.," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATIO	N."		_
(If name unavail	able in Florida, enter alternate corporate name ado	pted for the purpose of transaction	ng business i	n Florida))
Nevada	3.				
(State or countr	(State or country under the law of which it is incorporated) (FEI number,		fapplicable)		
7/22/2008	5				
(Date	of incorporation)	(Date of duration, if other	(Date of duration, if other than perpetual)		
	(Date first transacted business in FI (SEE SECTIONS 607.1501 & 607.1502)	orida, if prior to registration) F.S. to determine penalty liabil	ity)		_
H2 NORTH CU	·	Tion to determine penalty habit	,,		
	RRY STREET, CARSON CITY, NV 89703 (Principal office s	street address)			_
	(Current mailing a	ddress, if different)			_
	(Current maning a	duress, it different)		21	
Name and stree	et address of Florida registered agent: (P.O. B	Box NOT acceptable)	She.	JUN 2	
Name:	Corporate Creations Network Inc.	_		8	۰۰۰ د دن
ffice Address:	801 US Hwy I	_	a	;е н <i>у</i>	
	North Palm Beach	, Florida 33408	,	ယ	

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.



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	Name:	□Chairman	Name:				
□Vice Chairman	Address: 112 NORTH CURRY STREET	□ Vice Chairman	Address: 112 NORTH CURRY STREET				
□Director	CARSON CITY, NV 89703	□Director	CARSON CITY, NV 89703				
■President		□President					
□Vice President		□Vice President					
□Secretary	■ Treasurer	Secretary	□Treasurer				
Other	□Other	□Other	Other				
□ Chairman	Damian Mathews	□Chairman	Name: ALAN ALDEN				
	Address:112 NORTH CURRY STREET		Address:				
Director	CARSON CITY, NV 89703	□ Vice Chairman ■ Director	CARSON CITY, NV 89703				
□President		□President					
□Vice President		□Vice President					
□Secretary	□Treasurer	□Secretary	□Treasurer				
Other	Other	□Other					
□Chairman	Name: CHUL W LIM	□ Chairman	Name:				
	Address:		Address:				
Director	CARSON CITY, NV 89703	□ Director	Audioss.				
□President		□President					
□Vice President		□Vice President					
☐Secretary	□Treasurer	☐ Secretary	□ Treasurer				
□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.

Sean Arno, Attorney-in-Fact

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly qualified and elected Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporations sole, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **ESPORTS ENTERTAINMENT GROUP, INC.**, as a DOMESTIC CORPORATION (78) duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since 07/22/2008, and is in good standing in this state.

Certificate Number: B202106281787138

You may verify this certificate online at http://www.nvsos.gov

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 06/28/2021.

BARBARA K. CEGAVSKE Secretary of State