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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

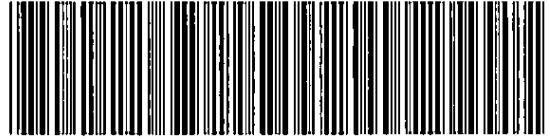
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 OCT -7 AM 11:13

TALLAHASSEE, FL

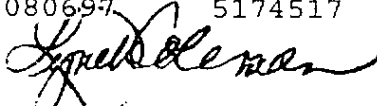
RECEIVED

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TALLAHASSEE, FL

SA

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 080697 5174517
AUTHORIZATION : 
COST LIMIT : \$ 70.00

ORDER DATE : October 5, 2021
ORDER TIME : 9:46 AM
ORDER NO. : 080697-005
CUSTOMER NO: 5174517

FOREIGN FILINGS

NAME: LAS VEGAS SANDS CORP.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT# 61592

EXAMINER: _____

**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.*

1. Las Vegas Sands Corp.
(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. Nevada 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 08/09/2004 5. Perpetual
(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. 112 North Curry Street, Carson City, NV, 89703
(Principal office address)

112 North Curry Street, Carson City, NV, 89703
(Current mailing address, if different)

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, , Florida 32301
(City) (Zip code)

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SECRETARY OF STATE
TALLAHASSEE, FL

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.

Corporation Service Company

By: Alexis Weibull, assistant vice president
(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: Patrick Dumont

Address: 112 North Curry Street, Carson City, NV, 89703

Vice Chairman: _____

Address: _____

Director: Robert G. Goldstein

Address: 112 North Curry Street, Carson City, NV, 89703

Director: Irwin Chafetz

Address: 112 North Curry Street, Carson City, NV, 89703

B. OFFICERS

President: Patrick Dumont

Address: 112 North Curry Street, Carson City, NV, 89703

Vice President: _____

Address: _____

Secretary: David Z. Hudson

Address: 112 North Curry Street, Carson City, NV, 89703

Treasurer: Patrick Dumont

Address: 112 North Curry Street, Carson City, NV, 89703

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

12. _____


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. David Z Hudson, Secretary

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

Addendum

11. Names and business addresses of officers and/or directors:

Name	Title	Address
Micheline Chau	Director	112 North Curry Street, Carson City, NV, 89703
Charles D. Forman	Director	112 North Curry Street, Carson City, NV, 89703
George Jamieson	Director	112 North Curry Street, Carson City, NV, 89703
Nora M. Jordan	Director	112 North Curry Street, Carson City, NV, 89703
Charles A. Koppelman	Director	112 North Curry Street, Carson City, NV, 89703
Lewis Kramer	Director	112 North Curry Street, Carson City, NV, 89703
David F. Levi	Director	112 North Curry Street, Carson City, NV, 89703

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, **LAS VEGAS SANDS CORP.**, 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 08/09/2004, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 10/06/2021.

Barbara K. Cegavske

BARBARA K. CEGAVSKE
Secretary of State

Certificate Number: B202110062051376

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