SIGNATURE:

DOCUMENT # F9800001997  1. Entity Name  GOLDEN NUGGET MARKETING CORP.					FILED Jan 31, 2000 8:00 am Secretary of State 01-31-2000 90023 026 ***150.00			
Principal Place of Business Mailing Address					01-31-2000 7002	.5 020	150.00	,
3260 SOUTH INDUSTRIAL ROAD LAS VEGAS NV 89109		3260 SOUTH INDUSTRIAL ROAD LAS VEGAS NV 89109-1132						
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE	IN THIS SPAC	Ε	
City & State		City & State		4.	7/1-22906//2		plied For	
Zip	Country	Zip	Country	5.	Certificate of Status Desired		75 Add Required	 litional
	6. Name and Address of Current R	egistered Agent		7.	Name and Address of New Reg		•	
			Name			-		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD			Street A	ddress (P.O. I	Box Number is Not Acceptable)			
	ITATION FL 33324							
			City			FL	Zip Code	9
9. This corpo	Signature, typed or printed name of registered agent an oration is eligible to satisfy its Intangible equirement and elects to do so, in an back)	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of Sta		00 550.00 t of State	10. Election Campaign Finan Trust Fund Contribution.		Added	<b>0</b> May Be to Fees
11.	OFFICERS AND D	IRECTORS Delete	12.		DDITIONS/CHANGES TO OFFICE	<del></del>		
NAME STREET ADDRESS CITY-ST-ZIP	PTD LEE, DANIEL R 3400 LAS VEGAS BOULEVARD SI LAS VEGAS NV 89109	NAME STREET ADDRESS CITY-ST-ZIP	3600 I	D xx Change □ Addition 1dwin, Robert H. 00 Las Vegas Boulevard South s Vegas. NV 89109				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Wynn, Kenneth R 3260 South Industrial Road Las Vegas NV 89109	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	AST LEVIN, BRUCE A 3260 SOUTH INDUSTRIAL ROAD LAS VEGAS NV 89109			3600	evin, Bruce A. 600 Las Vegas Boulevard, South as Vegas, NV 89109			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	□ 1220°.
TITLE NAME STREET ADORESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	□ Aller
indicated	certify that the information supplied with to on this report or supplemental report is poration or the receiver or trustee empore or on an attachment with an address with the contract of the	rue and accurate and that m	v signature shall b	lave the same	riedal effect as it made under oat	n mariam a	n omcer	or director

1/24/00

Daytime Phone #