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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
·	-	
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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SECRETARY OF STATE

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CHAPTOR	(// 1 //)

COVER LETTER

TO:

Registration Section Division of Corporations

Rainmaker Game LLC SUBJECT:

Name of Limited Liability Company

· The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this	s matter to the i	ollowing:		
Kevan Boyles	i			
	Nar	ne of Person		
Law Office of	Kevan	Boyles,	PA	
	Fire	n/Company		
319 8th Stree	t			
		Address		
West Palm Be	each, F	L 33401		
	City/Sta	te and Zip Code		
kb@boyleslav	vfirm.co	om		
E-mail addre	ss: (to be used	for future annual	report noti	fication)
For further information concerning this matter,	please call:			
Jane Monaco		_{at} 561	,833	32472
Name of Person	Area	Code & Daytime	Telephone	e Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Division Registra Clifton F 2661 Ex	r ADDRESS: of Corporations tion Section Building ecutive Center Ci sec, FL 32301	rcle	
Enclosed is a check for the following ar \$\overline{\mathbb{U}}\$\$125.00 Filing Fee \$\overline{\mathbb{U}}\$\$130.00 I Certificat	nount:	□ \$155.00 Filir Certified Co		☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE	STATE OF FLORIDA;
Rainmaker Game LLC	
(Name of Foreign Limited Liability Company; must include	e "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the altern Company," "L.L.C," "LLC.")	of transacting business in Florida and attach a copy of the written ate name. The alternate name must include "Limited Liability
₂ Delaware	46-0709945
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. 07/27/2012	perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
_{6.} January 1, 2013	
(Date first transacted business in Flori (See sections 608.501 & 608.502 F.S. to	da, if prior to registration.) o determine penalty liability)
7. 319 8th Street	TARE 1
West Palm Beach, FL 33401	SA SA
(Street Address of	Principal Office)
8. If limited liability company is a manager-managed or	ompany, check here ging members or managers are as follows:
9. The name and usual business addresses of the manag	ging members or managers are as follows:
Kevan Boyles	
319 8th Street	
West Palm Beach, FL 33401	
the jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under oath of the translator must be subm	itted.)
11. Nature of business or purposes to be conducted or p	promoted in Florida:
for service professionals.	
Many	
	orized representative of a member.
(In accordance with section 608.408(3), F.S., the executi	ion of this document constitutes an affirmation under the I am aware that any false information submitted in a
	third degree felony as provided for in s.817.155, F.S.)

Kevan Boyles Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

 The name of the Limited Liability Company is 	1.	The nar	ne of the	Limited	Liability	Company	y is:
--	----	---------	-----------	---------	-----------	---------	-------

Rainmaker Game, LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

Kevan Boyles, Esq

(Name)

319 8th Street

Florida Street Address (P.O. Box NOT ACCEPTABLE)

West Palm Beach

33401

City/State/Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "RAINMAKER GAME LLC" IS DULY FORMED

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

AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE

SHOW, AS OF THE SIXTEENTH DAY OF AUGUST, A.D. 2013.

5190309 8300

130993332

AUTHENTICATION: 0672026

DATE: 08-16-13

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