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SEURGESSEE, FLORIDE

B. BOSTICK

NOV - 8 2013

EXAMINER

COVER LETTER

TO:

Registration Section Division of Corporations

Vegas Resort and Casino LLC

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

□ \$125.00 Filing Fee □ \$130.00 Filing Fee &

Certificate of Status

Please return all correspondence concerning this matt	er to the following:	
Tony G. Reitz		
	Name of Person	-
USREDA LLC		
	Firm/Company	•
197 S. Federal H	Highway Suite 200	
	Address	•
Boca Raton, FL	33432	53
	City/State and Zip Code	س عد
tony.reitz@att.ne	et e filosoficiones de la filo	<u>,</u>
E-mail address: (to	be used for future annual report notification)	i '
For further information concerning this matter, please	call:	PE G
Tony Reitz	561 309-8134	15.
Name of Person	Area Code & Daytime Telephone Number	_
MAILING ADDRESS:	STREET ADDRESS:	
Division of Corporations	Division of Corporations	
Registration Section	Registration Section	
	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amoun	t:	

Certified Copy

□ \$155.00 Filing Fee & ■ \$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: Vegas Resort and Casino LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
2. State of Delaware 3. 46-3595055
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. September 4, 2013 5. Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. Has not yet conducted business in Florida
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7.
197 S. FEDERAL HIGHWAY SUITE 200 BOOK RATION FL. 33/132 (Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows:
Joseph J Walsh - 197 S. Federal Highway Suite 200 Boca Raton, FL 33432
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: Real Estate Development
- Ja
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any 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.)

Typed or printed name of signee

Joseph J Walsh

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.

1. The name of the Limited Liability Company is:

Vegas Resort and Casino 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:

Tony Reitz	MLL	[]; [];
(Name)	<u>- 新</u> 養 	- 10W
9100 Belvedere Road, #207		7 2
Florida Street Address (P.O. Box NOT ACCEPTABLE)	FLOW	ငှာ
Royal Palm Beach FL 33411	Section 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ត្ ក្ស
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.

\$ 100.00

(Signature)

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 THE ATTACHED ARE TRUE AND CORRECT

COPIES OF ALL DOCUMENTS ON FILE OF "VEGAS RESORT AND CASINO LLC"

AS RECEIVED AND FILED IN THIS OFFICE.

THE FOLLOWING DOCUMENTS HAVE BEEN CERTIFIED:

CERTIFICATE OF FORMATION, FILED THE FOURTH DAY OF SEPTEMBER,
A.D. 2013, AT 3:58 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE

AFORESAID LIMITED LIABILITY COMPANY, "VEGAS RESORT AND CASINO

LLC".

TALLAHASSEL FLORIN

5393508 8100Н

131172524

AUTHENTICATION: 0796141

DATE: 10-08-13

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

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY THAT "VEGAS RESORT AND CASINO LLC"

IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN

CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW

AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF FORMATION, FILED THE FOURTH DAY OF SEPTEMBER,

A.D. 2013, AT 3:58 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE

AFORESAID LIMITED LIABILITY COMPANY, "VEGAS RESORT AND CASINO

LLC".

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VEGAS RESORT AND CASINO LLC" WAS FORMED ON THE FOURTH DAY OF SEPTEMBER, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5393508 8310

131261921

AUTHENTY CATION: 0861783

DATE: 11-01-13

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 16, 2013

TONY G. REITZ 197 S. FEDERAL HIGHWAY SUITE 200 BOCA RATON, FL 33432

SUBJECT: VEGAS RESORT AND CASINO LLC

Ref. Number: W13000057448

We have received your document for VEGAS RESORT AND CASINO LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the complete principal office address.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Certificate of Formations are not acceptable,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Barbara Bostick Regulatory Specialist II

Letter Number: 513A00024202