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(Re	questor's Name)			
, (Ad	dress)			
, (Ad	dress)			
(City/State/Zip/Phone #)				
PICK-UP	MAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Do	cument Number)			
Certified Copies	·			
Special Instructions to	Filing Officer:			
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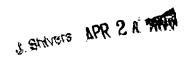
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COVER LETTER

SUBJECT: Nova Technologic	es, LLC		
SUBJECT.		ted Liability Company	
			ransact Business in Florida," Certificate of lity company to transact business in Florida
Please return all correspondence	e concerning this matter to th	e following:	
James G. Tzo	uvelekas		
· · · · · · · · · · · · · · · · · · ·		Name of Person	
Nova Technol	ogies, LLC		
·		Firm/Company	
620 N. Main S	Street, Suite 305		
		Address	
Greenville, SC			
	City/	State and Zip Code	
jgtz@novagam	ing.пеt & accountspayable@		
	E-mail address: (to be us	ed for future annual report notif	fication)
For further information concern	ing this matter, please call:		
James G. Tzouvelekas	1	at (864) 220-3	3775 Daytime Telephone Number
Name	e of Contact Person	Area Code I	Daytime Telephone Number
MAILING ADDRES Division of Corporatio Registration Section P.O. Box 6327 Tallahassee, FL 32314	ns Divisi Regist Cliftot 2661 I	on of Corporations ration Section Building Executive Center Circle lassee, FL 32301	
Enclosed is a check for the \$125.00 Filing Fee	following amount: \$\sum \\$130.00 \text{ Filing Fee & Certificate of Status}\$	☐ \$155.00 Filing Fee & Certified Copy	☐ \$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 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign Limited Liability Company; must in	clude "Limited Liability Company," "L.L.C.	." or "LLC.")
Nova Gaming, LLC		
(If name unavailable, enter alternate name adopted for the purpose o Liability Company," "L.L.C," or "LLC.")	ftransacting business in Florida. The alternat	e name must include "Limited
2. South Carolina	3. 20-0572078	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if app	oficable)
4.		
(See sections 605.0904 & 605.09	in Florida, if prior to registration.) 05, F.S. to determine penalty liability)	
5. Nova Technologies, LLC		
620 N. Main Street, Suite 305, Greenville, SC 29601		
(Street Addr	ess of Principal Office)	
6. Nova Technologies, LLC		·
PO Box 1847, Greenville, SC 29602		
	iling Address)	
7. The name, title or capacity and address of the polynomes G. Tzouvelekas - Chief Executive Officer	erson(s) who has/have authority to	manage fis/ares
		S 5 5
		F 00 17
8. Attached is an original certificate of existence, no having custody of records in the jurisdiction under the acceptable. If the certificate is in a foreign language must be submitted) Signature of Signature of the accordance with section 505.0225, P.S., the execution of this document cum aware that any false information submitted in a document to the Department.	he law of which it is organized. (A, a translation of the certificate unan authorized person onstitutes an affirmation under the penalties of person on the penalties of pe	A photocopy is not der oath of the translator
James G. Tzouvelekas	<u></u>	
Typed or print	ed name of signee	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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 nam	e of the Limited Liabili	ty Compa	ny is:			
Nova Technol	logies, LLC					
If unavailab	le, the alternate to be us	sed in the	state of Florida is:			
Nova Gaming	, LLC			* · · · · · · · · · · · · · · · · · · ·		_
2. The name	e and the Florida street	address of	f the registered agent and office are	9 :		
	C T Corporation Syste	em				
			(Name)			
	1200 South Pine Islan	d Road		SEC ALC	15 /	
	Florida	Street Addre	ess (P.O. Box NOT ACCEPTABLE)	THASS	APR 15	T. Treat
	Plantation		FL 33324		AH	表 护*
			City/State/Zip	F S FAI		t tra
liability com registered ag statutes relat	pany at the place design gent and agree to act in ting to the proper and co bligations of my position	nated in thi this capac omplete pe a as registo	e accept service of process for the actificate, I hereby accept the appirity. I further agree to comply with erformance of my duties, and I am forced agent as provided for in Chapt	opointment a the provisio amiliar with	as ons of ai n and	
	C T Corporation Sy By:		Defle Begy DAnijela Byers, Assista	ant Secretary		
		(Signatu	ure)			
	\$ \$ \$ \$	30.00	Filing Fee for Application Designation of Registered Agent Certified Copy (optional) Certificate of Status (optional)	:		

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

NOVA TECHNOLOGIES, LLC, A Limited Liability Company duly organized under the laws of the State of South Carolina on January 23rd, 2004, with a duration that is until December 31st, 2055, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to section 33-44-809 of the South Carolina Code, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 27th day of March, 2015.

Mark Hammond, Secretary of State