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(Requestor's Name)  (Address)	
(Address)	
(City/State/Zip/Phone #)	forc
(Business Entity Name)	
(Document Number)	
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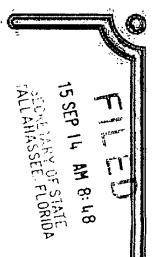
## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Full Tilt Capital 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 all correspondence concerning this matter to the following:
Andrew Dankins Name of Person
Name of Person
Firm/Company
2501 Erindele Daks LN
2501 Erindele Oaks LN Address
Valrico, FL 33596 City/State and Zip Code dawkinsandy@gmil.com
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Andrew Dawking at (904) 335-0644  Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations
Registration Section Registration Section
P.O. Box 6327  Tallahassee, FL 32314  Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:  \$\begin{align*} \begin{align*} \preceq \text{125.00 Filing Fee} &  \text{130.00 Filing Fee} &  \text{Certificate of Status} &  \text{Certified Copy} \end{align*}  \text{\$155.00 Filing Fee} &  \text{\$160.00 Filing Fee},  \text{Certified Copy} \end{align*}

## 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 FOR COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	REIGN LIMITED LIABILITY
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LL.	C.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name m Liability Company," "L.L.C," or "LLC.")	ust include "Limited
2. Jeyada 3. (FEI number, if applicable) company is organized)	
4. (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5. 32362 CR 121	
17 1   FL 32046 (Street Address of Principal Office)	ALL ALL
6. 32367 CF 121 Hilling CL 32046	AASSE P
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	R 8: L8
Name: Andrew Danking	TE RIDA
Office Address: 2501 Erindele Oaks Lw Valrico, Florida 33596	0
Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I fur with the provisions of all statutes relative to the proper and complete performance of my duties, and I am father obligations of my position as registered agent.  (Registered agent's signature)	ther agree to comply
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:    Manage   Manage	
Jeon Erindele Daks Ln' Valries, FL 33596	
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having cu jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the translator must be submitted)  Signature of an authorized person	
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any fissibilities in a document to the Department of State constitutes a third degree felony as provided for in s.817.13.  Typed or printed name of signee	





## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified 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, corporation soles, 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, FULL TILT CAPITAL, LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since August 11, 2015, 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 September 4, 2015.

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20150904-0376
You may verify this electronic certificate

online at http://www.nvsos.gov/