

M17000003965

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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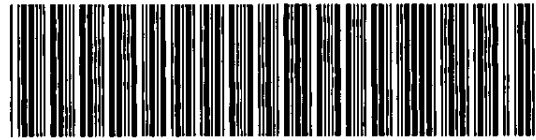
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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04/27/17--01013--006 **125.00

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2017 APR 27 P 3:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

n BRUCE
MAY 10 2017



PDS GAMING

April 21, 2017

VIA U.S. POSTAL SERVICE

Division of Corporations
Attention: Registration Section
P.O. Box 6327
Tallahassee, FL 32314

Re: Application by Foreign LLC for Authorization to Transact Business in Florida

Included herewith are the following:

1. Application by Foreign LLC for Authorization to Transact Business in Florida
2. Certificate of Good Standing

Also, included with this letter is one (1) separate check in the amount of \$125, made payable to the Florida Department of State in payment of the corresponding Filing Fee.

If you have any questions or require any additional information, please contact me by telephone at (702) 730-2118 or by e-mail at mcardona@pdsgaming.com.

Thank you for your consideration.

Very truly yours,

Magda A. Cardona
Compliance Officer

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TALLAHASSEE, FLORIDA

Enclosures

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: PDS Gaming 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:

Magda Cardona

Name of Person

PDS Gaming

Firm/Company

6280 Annie Oakley Drive

Address

Las Vegas, NV 89120

City/State and Zip Code

mcardona@pdsgaming.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Magda Cardona

at (702)

730-2118

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

1. PDS Gaming 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. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")
2. Minnesota 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 6280 Annie Oakley Drive
Las Vegas, NV 89120
(Street Address of Principal Office)
6. 6280 Annie Oakley Drive
Las Vegas, NV 89120
(Mailing Address)
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: NRAI SERVICES, INC
- Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(City) (Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Cheryl Conklin
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Lona Finley

Executive Vice President

6280 Annie Oakley Drive, Las Vegas, NV 89120

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

Lona Finley
Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Lona Finley

Typed or printed name of signer

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2017 APR 27 P 3:55

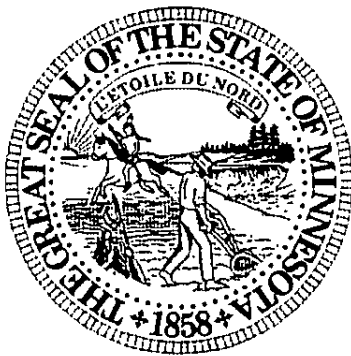
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**Office of the Minnesota Secretary of State
Certificate of Good Standing**

I, Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name:	PDS Gaming LLC
Date Filed:	01/17/2017
File Number:	928913400063
Minnesota Statutes, Chapter:	322C
Home Jurisdiction:	Minnesota

This certificate has been issued on: 02/15/2017



A handwritten signature in cursive script that reads "Steve Simon".

Steve Simon
Secretary of State
State of Minnesota