Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : INCORP SERVICES INC

Account Number : I20120000007

: (702)866-2500

Fax Number

: (702)900-2290

Enter the email address for this business entity to be used for fut annual report mailings. Enter only one email address please.

Email Address: documents@incorp.com

Foreign Limited Liability Company Rhino Sports & Entertainment Services, LLC

Certificate of Status	U
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

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COVER LETTER

EURIGCT)	Chino Sports & Entertainment Services, LL	C				
Name of Limited Liability Company						
The enclosed " Existence, and	Application by Foreign Limited Liability Colleck are submitted to register the above to	Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florida.				
Please return a	Il correspondence concerning this matter to	the following:				
	Katen Gibson					
	Name of Person					
	InCorp Services, Inc.					
Firm/Company 3773 Howard Hughes Pkwy, Suite 500s						
	Las Vegas, NV 89169	Address ity/Sinte and Zip Code gused for future annual report notification)				
	C	ity/State and Zip Code				
	documents@incorp.com					
	E-mail address: (to be	used for future annual report notification)				
For further inf	ormation concerning this matter, please or	ll:				
Kare	n Gibson for InCorp Services, Inc.	702 866-2500 a1 (
	Name of Contact Person	Area Code Daytime Telephone Number				
Regi Divi P.O. Talli	ing Address: istration Section ision of Corporations . Box 6327 ahassec, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Pleas	ised is a check for the following amount: the make check psyable to: FLORIDA DEI (25.00 Filing Fee S130.00 Filing Fe Certificate of	e & = \$155.00 Filing Fee & T1 \$160.00 Filing Fee. Certificate				

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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 POLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

(Name of Foreign Limited Liability Company, must include "Lin	пед Елявину Со	npany, Lile, or LLC.					
(I name manufable, enter alternate name adopted for the purpose of unitanting business in	Florida. The abou	nate name must include "Limited Liabili	ty Company," "T. L. C," or "L	ire.rs			
North Carolina		27-3377871					
2. (Initialization under the faw in which livenge limited hability company is organized)		(FE) number, is	(ii applicable)				
Upon Registration							
4. (Date this transacted business in Florida, it prior (See acciona 605,0904 & (05,0905, F.S. to dete	to registration.)	hiy)	- 				
119 Brookstown Ave	, 11	9 Brookstown Ave	2021				
5. (Succi Audioss of Principal Office)	o	(Mailing Address)		7.5			
Suite 203	Su	ite 203	<u> </u>	ू र द्वार े दक्क			
Winston Salem, NC 27103	W	inston Salem, NC 27101	PH				
7. Name and street address of Florida registered agent: (P.O. B	ox <u>NOT</u> acc	eptable)	# !	1			
InCorp Services, Inc.							
17888 67th Court North Office Address:							
Loxahatchee		33470 . Florida					

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.

Raien Set-Karen Gibson on behalf of InCorp Services, Inc.

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From: GFI FaxMaker To: 8506176383 Page: 5/6 Date: 7/7/2021 1:00:35 PM

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8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:		Name and Address:		
□Manager	Name:	n Hickman		⊟Manager	Name:	
[]Member	Address: _	19 Brookstown Ave		□Member	Address:	
□ Authorized	Suite 203			□Authorized		11.11
Person	Winston St	nlem, NC 27101		Person		
	Member	President ☐Other		Other		l'iOther
□Manager	Name:			□Manager	Name:	
[]Member	Address: _			□Member	Address:	
□Authorized Person				[T]Authorized		202
□Other				l'IOther		
∐Manager	Name:			∐Manager		PH F
[]Member	Address: _			Ш Member	Address:	
LJAuthorized				∐Authorized		
Person				Person		
□Other		□Other		□Other		f'l()ther

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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 fercign language, a translation of the certificate under oath of the translator must be submitted)

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

Brett Hickman

Typed or printed range of signee (((H21000262805 3)))



NORTH CAROLINA

(((H21000262805 3)))

Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

RHINO SPORTS & ENTERTAINMENT SERVICES, LLC

is a limited liability company duly formed, and existing under the laws of the State of North Carolina, having been formed on 3rd day of September, 2010

I FURTHER certify that, as of the date of this certificate, (i) the said limited liability company is not dissolved under the terms of its articles of organization, (ii) the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina, (iii) that said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act, (iv) that the office has not filed any decree of judicial dissolution, articles of dissolution, articles of merger or articles of conversion for said limited liability company.





Scan to verify online.

Certification# 110831158-1 Reference# 17616380- Page: 1 of 1 Verify this certificate online at https://www.sosnc.gov/verification

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 7th day of July, 2021.

Elaine I Marshall

Secretary of State

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