M21000009403

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

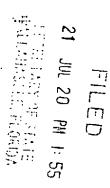
Office Use Only





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My X

COVER LETTER

Registration Section

TO:

Div	ision of Corporations					
SUBJECT:	OLDEN RULE ENTERTAINMENT LLC Name of Limited Liability Company					
		oility Company for Authorization to Transact Business in Florida," Certificate of bove referenced foreign limited liability company to transact business in Floridates.				
Please return	all correspondence concerning this ma	atter to the following:				
		Name of Person				
	GOLDEN RULE ENTERTAIN	MENT LLC				
	Firm/Company					
	8155 CHELSEA CT B					
Address						
	WEST PALM BEACH, FL 33406					
		City/State and Zip Code				
	Jamie@GoldenRuleEntertainment					
	E-mail address:	(to be used for future annual report notification)				
For further i	nformation concerning this matter, plea	ise call:				
JA	MIE TOOLE	815 545-3389 at ()				
	Name of Contact Person	Area Code Daytime Telephone Number				
Mailing Address: Registration Section Division of Corporations		Street Address: Registration Section Division of Corporations				
P.O. Box 6327		The Centre of Tallahassee				
Ta	llahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Ple	closed is a check for the following amorase make check payable to: FLORIDA \$125.00 Filing Fee	DEPARTMENT OF STATE				



FLORIDA DEPARTMENT OF STATE **Division of Corporations** certifical of good standing

June 25, 2021

JAMIE TOOLE 8155 CHELSEA CT B W PALM BEACH, FL 33406

SUBJECT: GOLDEN RULE ENTERTAINMENT LLC

Ref. Number: W21000092233

We have received your document for GOLDEN RULE ENTERTAINMENT LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

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.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 021A00014487

* Please Find

RECEIVED JUL 20 2021

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. GOLDEN RULE ENTE	RTAINMENT LLC imited Liability Company; must include '	'Limited Liability	Company," "L.L.C.," or "LLC.	····		
				ng law wice		
(if name unavailable, enter alternate na	une adopted for the purpose of transacting busing	ness in Florida. The a		I Liability Company," "L.L.G," or "LLC."		
DELAWARE 2		86-3813205 3. (FEI number, if applicable)				
2. (Jurisdiction under the law of which foreign limited liability company is organ		ed)	(FEI number, if applicable)			
4	(Date first transacted business in Florida, i (See sections 605.0904 & 605.0905, F.S. t	f prior to registration o determine penalty	i.) liability)			
8155 CHELSEA CT B			SISS CHELSEA OT B			
5. (Street Address of Principal Office)		6. (Mailing Address)				
WEST PALM BEACH			WEST PALM BEACH			
FL, 33406			FL, 33406			
7. Name and street addres	s of Florida registered agent: (P.	O. Box <u>NOT</u>	acceptable)	21		
	-					
Name:	JAMIE TOOLE			LE 20		
Office Address:	8155 CHELSEA CT B			D PH I: 5		
Office Address.	WEST PALM BEACH		33406 , Florida	10 × 10 × 10 × 10 × 10 × 10 × 10 × 10 ×		
	(City)	***	(Zip cod	<u>-</u>		

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

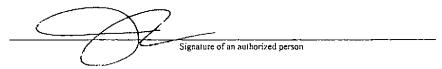
(Registered agent's signature)

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: JAMIE TOOLE	□Manager	Name:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
□Member	Address: 8155 CHELSEA CT B	□Member	Address:	
■ Authorized	WEST PALM BEACH	□Authorized		
Person	FL, 33406	Person		
□Other	Other	□Other		□ Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person		
□Other	□Other	□Other		□Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	· □Member	Address:	
□Authorized		□Authorized		
Person		Person		
□Other	□ Other	□Other		□Other

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 foreign 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. 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.



Page 1



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

DELAWARE, DO HEREBY CERTIFY "GOLDEN RULE ENTERTAINMENT LLC" IS DULY

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

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE EIGHTH DAY OF JULY, A.D. 2021.



Authentication: 203620651

Date: 07-08-21