

P01000048616
TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Trifecta Gaming Products, Inc.
(Proposed corporate name - must include suffix)

600004198646--3
-05/10/01--01096--003
*****78.75 *****78.75

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Access Incorporation Services, Inc.
Name (Printed or typed)

21550 Oxnard Street, Suite 300
Address

Woodland Hills, CA 91367
City, State & Zip

800-788-9706
Daytime Telephone number

FILED
01 MAY 10 AM 01:51
SECRETARY OF STATE
TALLAHASSEE, FL 32314

NOTE: Please provide the original and one copy of the articles.

5-16-01
HAC

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Trifecta Gaming Products, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

12855 Daniel Drive Unit B

Clearwater, FL 33762

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

2000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Douglas Etman

12855 Daniel Drive Unit B, Clearwater, FL 33762

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Gannon Stride

21550 Oxnard Street, Suite 300

Woodland Hills, CA 91367


Signature/Incorporator

April 26, 2001

Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent


Signature/Registered Agent


Date

FILED
01 MAY 10 AM 8:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA