### STATE OF NEVADA

### BARBARA K. CEGAVSKE

Secretary of State

### KIMBERLEY PERONDI

Deputy Secretary for Commercial Recordings



### Commercial Recordings Division

202 N. Carson Street Carson City, NV 89701-4201 Telephone (775) 684-5708 Fax (775) 684-7138

### SECRETARY OF STATE

Scott Anderson

NV

Job:C20170324-2115 March 24, 2017

### Special Handling Instructions:

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Entity Copies	00010588849-13		25	\$0.00	\$0.00
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Document					
Total					\$0.00

### **Payments**

Туре	Description	Amount
Total		\$0.00

Credit Balance: \$0.00

### Job Contents:

NV Corp Certified Copy Request Cover 1 Letter(s):

Scott Anderson

NV

### STATE OF NEVADA

BARBARA K. CEGAVSKE Secretary of State

### KIMBERLEY PERONDI

Deputy Secretary for Commercial Recordings



### Commercial Recordings Division

202 N. Carson Street Carson City, NV 89701-4201 Telephone (775) 684-5708 Fax (775) 684-7138

## OFFICE OF THE SECRETARY OF STATE

### **Certified Copy**

March 24, 2017

**Job Number:** C20170324-2115 **Reference Number:** 00010588849-13

**Expedite:** Through Date:

The undersigned filing officer hereby certifies that the attached copies are true and exact copies of all requested statements and related subsequent documentation filed with the Secretary of State's Office, Commercial Recordings Division listed on the attached report.

Document Number(s)	Description	<b>Number of Pages</b>
LLC13379-2001-001	Articles of Organization	1 Pages/1 Copies
LLC13379-2001-005	Initial List	1 Pages/1 Copies
LLC13379-2001-004	Annual List	1 Pages/1 Copies
LLC13379-2001-002	Annual List	1 Pages/1 Copies
LLC13379-2001-003	Registered Agent Change	1 Pages/1 Copies
20050003836-87	Annual List	1 Pages/1 Copies
20050003837-98	Resignation of Officers	1 Pages/1 Copies
20050141427-56	Amended List	1 Pages/1 Copies
20050464697-53	Registered Agent Change	1 Pages/1 Copies
20060001973-28	Annual List	1 Pages/1 Copies
20060840058-23	Annual List	1 Pages/1 Copies
20070818664-12	Annual List	1 Pages/1 Copies
20080804588-13	Annual List	1 Pages/1 Copies
20090881915-23	Annual List	1 Pages/1 Copies
20100916111-82	Annual List	1 Pages/1 Copies
20110110728-73	Registered Agent Resignation	3 Pages/1 Copies
20110110730-16	Registered Agent Change	1 Pages/1 Copies
20110876703-05	Annual List	1 Pages/1 Copies
20120860827-86	Annual List	1 Pages/1 Copies
20130797222-45	Annual List	1 Pages/1 Copies
20140828833-29	Annual List	1 Pages/1 Copies
20150542857-69	Annual List	1 Pages/1 Copies
20160495778-19	Annual List	1 Pages/1 Copies

### **Commercial Recording Division**

202 N. Carson Street Carson City, Nevada 89701-4201 Telephone (775) 684-5708 Fax (775) 684-7138



Certified By: Diane Seeber

Certificate Number: C20170324-2115
You may verify this certificate
online at http://www.nvsos.gov/

Respectfully,

Respectfully, Ballona K. Cegarske BARBARA K. CEGAVSKE Secretary of State

12/85/01 18:38:16

Please Deliver To:->

782 434 1644 STATE OF MEVADA

Page 882



## DEAN HELLER Secretary of State

202 North Carson Street Carson City, Nevada 88701-4201 (775) 884 5708



FILED # UC 13374-01

DEC 0 7 2001

HITHE OFFICE OF THE LITTLE OF THE CONTROL OF THE CO

	imp	octant: Read attached instructions before co	mpreung rurm.		
1	Name of Limited: Liability Company:	Capital Seven, LLC			
	Resident Agent Name and Street Address: Invalue & News & Makes Mark Agent may be 380000]	Sandy Marr Nemo  1055 E. Tropicana, #700 Spent Address	Las Veças Chy	, NEVADA	89119 Zie Code
3.	Dissolution Date:	Latest data upon which the company is to dissolve	(if existence is not perpetual):	12-7-2031	L ·
4.	Managementi (check one)	Company shall be managed by X	nger(s) OR Members		
	Names Addresses, of Manager(s) or Members: (ellam eddlions) mont se nesses(c)	Shawn Scott Name 1055 E. Tropicana, #700 Street Address	Las Vegas ;	NV Sinte	89119 Zip Code
	4	Name Street Address	CITY .	State	Zip Code
		Name Street Address	City	Siste	Zip Code
\$.	Other Matters: (see instructions)	Number of additional pages attached:			
	Names, Addresses, and Signesures of Organizers): latest additional pages of their are come than 2	Sandy Marr	Signoture	EL	
	than are more ligin 2 arganisatel	1055 E. Tropicana, #700	Cay Vegas	, NV State	89119 Zip Code
	,	Name	Signature		
	,	Address	City	State	Zip Code
7.	Cartificate of Acceptance of Appointment of Resident Agent:	Sandy Marr	hereby accept appointment named limited-liability corn	t as Resident A pany.	gent for the above
		Authorized Signature of P.A. or On Benaif of R	A Company Date 12/	701	

This form must be accompanied by appropriate fees. See atteched fee schedule.

					- FILE NUM	<b>MBER</b>
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Nomeda	ne of Limited-Liability Company)	FOR THE FILI	ING PERIOD	<b>12/7/01</b> T		
The Limited-Liability Company's duly in the State of Nevada upon whom p	process can be served is:	Office Use On	do	LED#		
1055 E. Torpicana, i Las Vegas, NV 89119		185		JAN 1 0 20 MINE OFFICE OF DA. 701 DEAN HELLER SECRETARY OF	02.	
	isidence or business, for all managers, or if r is, attach a list of them to this form. filing fee. A \$50.00 penalty must be added for f State. Your cancelled check will constitute a FED ENVEL OPE. To receive a certified conv.	for failure to file this form a certificate to transact t , enclose a copy of this o NV 89701-4201, (775) 6	n by the 1st day of the 2 business. If you need a completed form, an add 684-6708. LLTY: \$50.00	2nd month following orga a receipt, return page 2 or ditional \$20.00 and appro	anization date.	
NAME				REJECTED IF TITLE NOT IN	IDICATED)	
Shawn Scott			XX MANAGER	MEMBER		
P.O. BOX	STREET ADDRESS 1055 E. Tropicana,	700	спу Las Vegas	st. <b>NV</b>	ZIP <b>89119</b>	:
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			MANAGER	☐ MEMBER		Y82-
P.O. BOX	STREET ADDRESS		СПҮ	ST.	ZIP	989-4
I declare, to the best of my knowledge.	, under penalty of perjury, that the a	bove mentioned en	itity has complied v	vith the provisions o	f chapter 364A of I	STS.
X Signature of officer	feato			a Wage Da	erit er an er an er	

Mawagn Date 1-04-02

# ANNUAL LIST OF MANAGERS OR MEMBERS OF:

CAPITAL SEVEN, LLC

FILE NUMBER

FOR THE PERIOD DEC 2002 TO 2003. DUE BY DEC 31, 2002. The Limited-Liability Company's duty appointed resident agent in the State of Nevada upon whom process can be served is:

13379-2001

FOR OFFICE USE ONLY RA# 104786 FILED (DATE) 00100- 135 SANDY MARR 20 1055 E TROPICANA #700 LAS VEGAS NV 89119 FILED JAN 1 3 2003 IF THE ABOVE INFORMATION IS INCORRECT, PLEASE CHECK THIS BOX AND A CHANGE OF RESIDENT AGENT ADDRESS FORM WILL BE SENT Dean Haller PLEASE READ INSTRUCTIONS REFORE COMPLETING AND RETURNING THIS FORM, Secretary of State include the names and addresses, either residence or business for all managers, or if none, its members. Last year's information has been preprinted. If you need to changes cross out the incorrect information and insert the new information above it. A manager, or it none, a member of the company must sign the form form we'l be returned if unsigned If Store are additional managers or members, affect a first of them to this form Recurs the completed form with the \$85.00 filing fee. A \$50 penalty must be added for failure to file this form by the deadline indicated at the top of this form. An annual ार्च received there than 60 days before के due date shall be deemed an amended list for the previous year Make your check payable to the Secretary of State. If you need a recept enclose a self-addressed stamped envelope. To receive a certified copy, enclose a copy of Natura the completed form in Secretary of State 202 N Carson St. Carson City, NV 89701-4201 (775) 584-5708 FRING FEE: \$85 00 PENALTY: \$50.00 (Document will be rejected if Title not indicated) SHAWN SCOTT MANAGER STEET ADDEES MEMBER HANAGER 1055 E TROPICANA #700 LAS VEGAS 89119 MANAGER MEMBER STREET ADDRESS TITLETE MANAGER STORET ADDRESS MEMBER TITLEIS (Document will be rejected if Title not indicated) MANAGER MEMBER STREET ADDRESS 55 (Document will be rejected if Title not indicated) MANAGER MEMBER

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has compiled with the provisions of chapter 364A of NRS.

X Signature of Blanader or Blan

Date 1-8-03

SANDY MARR

### ANNUAL LIST OF MANAGERS OR MEMBERS OF:

CAPITAL SEVEN, LLC

FILE NUMBER

13379-2001

FOR THE PERIOD DEC 2003 TO 2004. DUE BY DEC 31, 2003. The Limited-Liability Company's duly appointed resident agent in the State of Nevada upon whom process can be served is:

> RA# 104786

FOR OFFICE USE ONLY FILED (DATE)

JAN 1 2 2004

 $\hfill \square$  ) F The above information is incorrect, please check this box and a change of resident agent/address form will be sent.

### PLEASE READ INSTRUCTIONS BEFORE COMPLETING AND RETURNING THIS FORM.

1055 E TROPICANA #700 LAS VEGAS NV 89119

- 1. Include the names and addresses, either residence or business, for all managers, or if none, its members. Lost year's information has been preprinted. If you need to make changes, cross out the incorrect information and insert the new information above it. A manager, or if none, a member of the company must sign the form. FORM WILL BE RETURNED IF UNSIGNED.
- 2. If there are additional managers or members, attach a list of them to this form,
- 3. Return the completed form with the \$125,00 filing fee. A \$75,00 penalty must be added for falking to file this form by the deadline. An annual first received more than 90 days before its due date shall be deemed an amended list for the previous year.

  Make your check payable to the Secretary of State. To receive a certified copy, enclose an additional \$30.00 and appropriate instructions.
- 5. Return the completed form to: Secretary of State, 202 N. Carson St., Carson City, NV 89701-4201. (775) 694-5708.
- 6. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties.

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SHAWN SCOTT			
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seciare, to the best of my knowledge un	der penalty of perjury, that the above mant	loned entity has on	mpiled with the provisions of NRS 350,760 and acknowledge that
reuam to NHS 238.330, it is a category	C felony to knowingly offer any false of fat	ged instrument for	mplied with the provisions of NRS 350,780 and acknowledge that filling in the Office of the Secretary of State.
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7/ 4 //			





DEAN HELLER
Secretary of State
202 North Carson Street
Carson City, Nevada 89701-4201
(775) 684 5708
Website: secretaryofstate,biz

### Certificate of Change of Resident Agent and/or Location of Registered Office

General instructions for this form:

- 1. Please print legibly or type; Black ink Only.
- 2. Complete all fields.
- The <u>physical Neyada</u> address of the resident agent must be set forth; PMB's are not acceptable.
- 4. Ensure that document is signed in signature fields.
- 5. Include the filing fee of \$50.00.



ABOYE SPACE IS FOR OFFICE USE ONLY

Name of Entity File Number
7.76
The change below is effective upon the filing of this document with the Secretary of State.
Reason for change: (check one) Change of Resident Agent Change of Location of Registered Office
The former resident agent and/or location of the registered office was:
Resident Agent: Sandy Marr
Street No.: 1055 EAST TROPICANA EVENUE SEE . 700
City, State, Zip: LAS VEGAS, NEVADA 89119
The resident agent and/or location of the registered office is changed to:
Resident Agent: PRISCILLA CARVIN 168507
Street No.: 3720 WAYNESVILL
City, State, Zip: LAS VEGAS. NEVADA 89122
Optional Mailing Address:
NOTE: For an entity to file this certificate, the signature of one officer is required.
X Signature/Title

Certificate of Acceptance of Appointment by Resident Agent:

I hereby accept the appointment as Resident Agent for the above-named business entity.

X
Authorized Signsture of R.A. or On Behalf of R.A. Company

JULY 26, 2004

This form must be accompanied by appropriate fees. See attached fee schedule.

Novado Secretary of State RA Change 2005

Reviews on: 11/19/0

# ANNUAL EIST OF MANAGERS OF MEMBERS OF

AMENDED -

FILE NUMBER

CAPITAL SEVEN, LLC

PRISCILLA GARVIN

3720 WAYNESVILLE

LAS VEGAS NV 89122

13379-2001

FOR THE PERIOD DEC 2004 TO 2005, DUE BY DEC 31, 2004.
The Limited-Liability Company's duty appointed resident agent in the State of Neveda.

upon whom process can be served is:

RA#

168597

FILED (DATE)

Filed in the office of Document Number 20050003836-87

FOR OFFICE USE ONLY

San Helle Dean Heller Secretary of State

Filing Date and Time 02/10/2005 2:17 PM

Entity Number

State of Nevada LLC13379-2001

IF THE ABOVE INFORMATION IS INCORRECT, PLEASE CHECK THIS BOX AND A CHANGE OF DESIDENT AGENTIADDRESS FORM WILL BE SENT. PLEASE READ INSTRUCTIONS BEFORE COMPLETING AND RETURNING THIS FORM.

1. Include the natives and addresses, either residence or business, for all managers, or if none, its members, Lest year's information has been proprieted. If you need to

make changes, cross out the incorrect information and insert the new information above E. A manager, or II none, a member of the company must sign the form. FORM WALL HE RETURNED IF UNSIGNED.

If there are additional managers or members, attach a last of them to this form.

3. Return the completed form with the \$125.00 filing fee. A \$75,00 penalty must be added for tailure to file this form by the deadline. An annual list received more than 90 days

before its duo date shall be deemed an amended flat for the provious year.

Make your check payable to the Secretary of State. To receive a certified copy, enclose an additional \$30.00 and appropriate instructions.

6. Return the completed form to: Secretary of Sinte. 202 N. Carson St., Carson City, NV 89701-4201. (775) 684-5708.

Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Posmerk date is not accepted as receipt date.) Forms received wher due date will be returned for additional leas and penalties.

PENALTY: \$76.00 FILING FEE: \$125.00 (Document will be rejected if Title not indicated) TTHE (S) MEMBER 00 MANAGÉR Frederiksted T. VIII 00841 SCOTT Strand #700 LAS VEGAS MEMBE (Document will be rejected if Title not indicated) TITLE(S) MEMBER MANAGER F.O. ESP (Document will be rejected if This not indicated) TITLE IS MANAGER MEMBER P.O. BOX (Document will be rejected if This not indicated) TTTLE (B) MEMBER MANAGER P.O. M (Document will be rejected if This not indicated) TITIE(S) MANAGER MEMBER ADDRESS P.O. BOR

I decigra, to the best of my knowledge under penalty of perjury, that the above mentioned emity has complied with the provisions of NRS 350,790 and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly effor any take of lorged instrument for filling in the Office of the Secretary of State.

SAREDIO



DEAN HELLER Secretary of State 202 North Carson Street Carson City, Nevada 89701-4201 (775) 684 5708 Website: secretaryofstate.biz

Certificate of Resignation of Officer, Director, Manager, Member, General Partner, Trustee or Subscriber Filed in the office of

Document Number 20050003837-98

San Heller Secretary of State

State of Nevada

Filing Date and Time 02/10/2005 2:17 PM

Entity Number

LLC13379-2001

Important. Read attached instructions before completing form.

ABOVE SPACE IS FOR OFFICE USE ONLY

# Certificate of Resignation of Officer, Director, Manager, Member, General Partner, Trustee or Subscriber

Shawn Scott	Manager and Member
(Name)	(Title(s))
2. The name and file number of the entity for	which resignation is being made:
Capital Seven, LLC	13379-2001
(Name of Entity)	(File Number
•	
	4
3. Signature:	4

Capital Seven, LLCAMEN	NDED		13379-2001
(Name of Limited-Liability Cor	mpany)		formation and the second secon
R THE FILING PERIOD OF December 2004	то December 2005		
e corporation's duly appointed resident agent in the State of Neva	ada upon whom process can be served is:	Filed in the off	Document Number 20050141427-56
Priscilla Garvin 3720 Waynesvill St.	:	Dean Heller Secretary of Sta	Filing Date and Time <b>04/19/2005 6:43</b>
Las Vegas, NV 89122		State of Nevada	
CHECK BOX IF YOU REQUIRE A FORM TO UPDATE YOUR RE	ESIDENT ACENT INECOMATION		
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DEAN HELLER Secretary of State 202 North Cerson Street Carson City, Nevada 89761-4201 (775) 684 5708 Website: secretaryofatate.biz

Certificate of Change of Resident Agent and/or Location of Registered Office

Filed in the office of

Dan Hellen

Dean Heller

Secretary of State

State of Nevada

Document Number

20050464697-53

Filing Date and Time

10/06/2005 8:00 AM

Entity Number

LLC13379-2001

A					
General	MEETUC	1100118	TOT :	THE S	tom:

- 1. Please print legibly or type; Black Ink Only.
- 2. Complete all fields.
  3. The <u>Physical Nevada</u> eddress of the resident agent must be set forth; PMB's are not acceptable.
  4. Ensure that document is signed in signature fields.
  5. Include the filing fee of \$60.00.

ABOVE SPACE IS FOR OFFICE USE ONLY

CAPITAL SEVEN, LLC		LLC13379-2001
Name of Entity		File Number
The change below is eff	active upon the filing of this document with the Secretary of S	tate.
	one) Z Change of Resident Agent Change of Location of	
	nt and/or location of the registered office was:	
Resident Agent	PRISCILLA GARVIN	
Street No.:	3720 WAYNESVILLE	
City, State, Zip: {	LAS VEGAS, NV \$9122	
The resident agent and/o	or location of the registered office is changed to:	
Resident Agent:	SANDY MARR	
Street No.:	379 TIERRAS BLANCOS CT	
City, State, Zip:	LAS VBGAS, NV 89138	
Optional Mailing Address		
NOTE: F	or an entity to file this certificate, the signature of one officer i	s required.
x	a Manager	
	Signature/Title	,
Certificate	of Acceptance of Appointment by Reside	ent Agent
	intment as Resident Agent for the above-named business ent	
	11	
X/m	10/4/05	
Authorized Signeture of R.A. or O		
This form must be accompa	nied by appropriate fees.	

Novade Secretary of State RA Change 2009 Revised on 11/1003

ANNUAL LIST OF MANAGER OR N	1EMBERS AND RESIDENT AGE	NT OF	FILE NUMBER
CAPITAL SEVEN, LLC			LLC13379-2001
(Name of Limited-Lia			
R THE FILING PERIOD OF 12/2005	<sub>TO</sub> 12/2006		
corporation's duly appointed resident agent in the State	e of Nevada upon whom process can be served is:		
SANDY MARR		Filed in the office of San Alla-	20060001973-28
379 TIERRAS BLANCOS CT AS VEGAS, NV 89138		Dean Heller Secretary of State State of Nevada	Filing Date and Time 01/03/2006 11:03 Entity Number LLC13379-2001
CHECK BOX IF YOU REQUIRE A FORM TO UPDATE		33000000000000000000000000000000000000	ument was filed electronically.) s FOR OFFICE USE ONLY
ere are additional managers or members, attach a list of the um the completed form with the \$1.25.00 filing fee. A \$75.0 fill be deemed an amended list for the previous year. e your check payable to the <b>Secretary of State</b> . Your cancel um the completed form to: Secretary of State, 202 North Ca m must be in the possession of the Secretary of State on of returned for additional fees and penalties.	led check will constitute a certificate to transact business, rson Street, Carson City, NV 897014201, (775) 864-5701 or before the last day of the month in which it is due. (Proceedings of the street of the stree	To receive a certified copy, enclose a 8. ostmark date is not accepted as received as rece	n additional \$30.00 and appropriate instri eipt date.) Forms received after due dat
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DDRESS	CITY	ST	ZIP

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of NRS 360,780 and acknowledge that pursuant to NRS 239 380 it is a category C felony to knowingly offer any felse or forged instrument for filing in the Office of the Secretary of State.

X Signature of Manager or Managing Member HOOLAE PAOA

Title MANAGER Date 1/3/2006 10:29:20 PM

CAPITAL SEVEN, LLC	IVAGING WEWDENS AND TO	ESIDENT AGENT O	LLC13379-2001
(Name of Limited-Liabili	ty Company)		!
10/0000			
OR THE FILING PERIOD OF 12/2006	το ΙΖΖου,		
he corporation's duly appointed resident agent in the State of	Nevada upon whom process can be served i	Filed in the offi	ce of Document Number
SANDY MARR		San Helle-	20060840058-23
379 TIERRAS BLANCOS CT LAS VEGAS, NV 89138		Dean Heller Secretary of Sta	Filing Date and Time 12/30/2006 10:33 P
		State of Nevada	
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I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of NRS 360,780 and acknowledge that pursuant to NRS 339.380 it is a category C felony to knowledge offer any false or forged instrument for filing in the Office of the Secretary of State.

X Signature of Manager or Managing Member HOOLAE PAOA

Title MANAGER Date 12/30/2006 10:17:23 PM

ANNUAL LIST OF MANAGER OR	MANAGING MEMBI	ERS A	ND RESID	DENT A	GENT OF	FILE NUMBER
CAPITAL SEVEN, LLC						LLC13379-2001
(Name of Limited-L	iability Company)				:	
OR THE FILING PERIOD OF 12/2007	<sub>TO</sub> 12/2008					
***************************************				,		
he corporation's duly appointed resident agent in the Sta	ite of Nevada upon whom proc	ess can be	served is:	Filed	in the office of	Document Number
SANDY MARR					a Me	20070818664-12
379 TIERRAS BLANCOS CT LAS VEGAS, NV 89138				Ross I		Filing Date and Time 12/03/2007 3:03 PN
					ary of State	Entity Number
				State	of Nevada	LLC13379-2001
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f there are additional managers or managing members, attact Return the completed form with the \$1.25.00 filing fee. A \$75. shall be deemed an amended list for the previous year.	a list of them to this form. 00 penalty must be added for fail	ure to file t	his form by the de	eadline. An a	nnual list received mo	re than 90 days before its due date
shall be deemed an amended list for the previous year. Make your check payable to the <b>Secretary of State</b> . Your cand Beturn the completed form to: Secretary of State, 202 North C	elled check will constitute a certific arson Street, Carson City, NV 691	ate to trans	act business. To 1775) 664-5706.	receive a cert	ified copy, enclose an	additional \$30.00 and appropriate instruct
Form must be in the possession of the Secretary of State on be returned for additional fees and penalties.	or before the last day of the mor	nth in which	n it is due. (Postn	nark date is r	not accepted as receip	t date.) Forms received after due date v
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I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of NRS 360,780 and acknowledge that pursuant to NRS 339.380 it is a category C felony to knowledge offer any false or forged instrument for filing in the Office of the Secretary of State.

X Signature of Manager or Managing Member HOOLAE PAOA

Title MANAGER Date 12/3/2007 3:01:28 PM

CAPITAL SEVEN, LLC			LLC13379-2001
(Name of Limited-Liability C		:	······
R THE FILING PERIOD OF 12/2008	<sub>TO</sub> 12/2009		
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corporation's duly appointed registered agent in the State of N	Nevada upon whom process can be served is:	Filed in the office	of Document Number
ANDY MARR 79 TIERRAS BLANCOS CT		· da Me	20080804588-13 Filing Date and Time
AS VEGAS, NV 89138		Ross Miller	12/10/2008 7:31 P
		Secretary of State State of Nevada	Entity Number LLC13379-2001
			LLC 13379-2001
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I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of NRS 360,780 and acknowledge that pursuant to NRS 239,380 it is a category C felony to knowingly offer any felse or forged instrument for filing in the Office of the Secretary of State.

X Signature of Manager or Managing Member HOOLAE PAOA Title MANAGER Date 12/10/2008 7:25:19 PM

ANNUAL LIST OF MANAGERS OR MANAGING MEMBI STATE BUSINESS LICENSE APPLICATION OF:	ERS AND	REGISTERED AG	GENT AND FILE NUMBER
CAPITAL SEVEN, LLC			LLC13379-2001
NAME OF LIMITED-LIABILITY COMPANY			
FOR THE FILING PERIOD OF 12/2009 TO 12/20	10		
**YOU MAY FILE THIS FORM ONLINE AT www.nvsos.gov**		<b>       </b>	
The entity's duly appointed registered agent in the State of Nevada upon whom process car	n be served is:		*110401*
SANDY MARR		Filed in the office	of Document Number
379 TIERRAS BLANCOS CT		· Za Mea	20090881915-23
LAS VEGAS, NV 89138		Ross Miller	Timig Date and Time
		Secretary of State	12/23/2009 7:34 PM Entity Number
A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT: www.nv	ISOS MOV	State of Nevada	LLC13379-2001
USE BLACK INK ONLY - DO NOT HIGHLIGHT	505.g01	(This	document was filed electronically.) VESPACE IS FOR OFFICE USE ONLY
Return one file stamped copy. (If filing not accompanied by order inst	tructions, file s		
IMPORTANT: Read instructions before completing and returning this form.	,	1 12	<b>3 3</b> ,
<ol> <li>Print or type names and addresses, either residence or business, for all manager or man the form. FORM WILL BE RETURNED IF UNSIGNED.</li> </ol>	aging members	. A Manager, or if none, a M	lanaging Member of the LLC must sign
2. If there are additional managers or managing members, attach a list of them to this form.			
<ol><li>Annual list fee is \$125.00. A \$75.00 penalty must be added for failure to file this form by deemed an amended list for the previous year.</li></ol>			ian su days before its due date shall be
<ol> <li>State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for fai</li> <li>Make your check payable to the Secretary of State.</li> </ol>	lure to file form	by deadline.	
6. <u>Ordering Copies:</u> If requested above, one file stamped copy will be returned at no addit A copy fee of \$2.00 per page is required for each additional copy generated when ord accompany your order.	tional charge. T lering 2 or more	o receive a certified copy, end file stamped or certified copie	close an additional \$30.00 per certifications. Appropriate instructions must
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City,	-	- , ,	
<ol><li>Form must be in the possession of the Secretary of State on or before the last day of the received after due date will be returned for additional fees and penalties. Failure to inclu</li></ol>	month in which de annual list ar	it is due. (Postmark date is n nd business license fees will re	not accepted as receipt date.) Forms esult in rejection of filing.
ANNUAL LIST FILING FEE: \$125.00 LATE PENALTY: \$75.00	<u>BUSINESS L</u>	ICENSE FEE: \$200.00	LATE PENALTY: \$100.00
Complete only if applicable  Pursuant to NRS, this corporation is exempt from the business license fe  Month and year your State Business License expires:  1 2	e. Exemption	001 002 003 004 9	ction 7(2) Exemption Codes  - Governmental Entity 2 - 501(c) Nonprofit Entity 3 - Home-based Business 4 - Natural Person with 4 or less rental dwelling units 5 - Motion Picture Company 6 - NRS 680B.020 Insurance Co.
NAME	: '		) IF TITLE NOT INDICATED)
HOOLAE PAOA		MANAGER	MANAGING MEMBER
ADDRESS	CITY		STATE ZIP CODE
PMB 29 BOX 10001 , USA	SAIPAN		MP 96950
NAME	(DOCI	UMENT WILL BE REJECTED	) IF TITLE NOT INDICATED)
		MANAGER	MANAGING MEMBER
ADDRESS	CITY	······	STATE ZIP CODE
	J.		
NAME	(DOCI	UMENT WILL BE REJECTED	) IF TITLE NOT INDICATED)
		MANAGER	MANAGING MEMBER
ADDRESS	CITY		STATE ZIP CODE
NAME	(DOCI	UMENT WILL BE REJECTED	) IF TITLE NOT INDICATED)
		MANAGER	MANAGING MEMBER
ADDRESS	CITY		STATE ZIP CODE
I declare, to the best of my knowledge under penalty of perjury, that the above mention the 2009 session of the Nevada Legislature and acknowledge that pursuant to NRS 2 instrument for filing in the Office of the Secretary of State.	oned entity has 39.330, it is a c	s complied with the provision ategory C felony to knowing	ons of sections 6 to 18 of AB 146 of gly offer any false or forged
₩ HOOLAE PAOA	Title		Date
X		MANAGER	12/23/2009 7:21:54 PM

ANNUAL LIST OF MANAGERS OR MANAGING MEMBI STATE BUSINESS LICENSE APPLICATION OF:	ERS AND	REGISTERED AG	ENT AND FILE NUMBER
CAPITAL SEVEN, LLC			LLC13379-2001
NAME OF LIMITED-LIABILITY COMPANY			
FOR THE FILING PERIOD OF 12/2010 TO 12/20	11		
**YOU MAY FILE THIS FORM ONLINE AT www.nvsos.gov**			
The entity's duly appointed registered agent in the State of Nevada upon whom process car	be served is:		*110401*
SANDY MARR		Filed in the office	of Document Number
379 TIERRAS BLANCOS CT			20100916111-82
LAS VEGAS, NV 89138		· La Mes	Timig Date and Time
		Ross Miller Secretary of State	12/09/2010 9:50 PM
		State of Nevada	Entity Number LLC13379-2001
A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT: www.nv	sos.gov	(This	ncument was filed electronically to
Return one file stamped copy. (If filing not accompanied by order inst	tructions files		E SPACE IS FUH UFFICE USE UNLY
IMPORTANT: Read instructions before completing and returning this form.	rudions, ille s	nampeo copy wiii de sent i	o registereo agent.)
Print or type names and addresses, either residence or business, for all manager or man the form. FORM WILL BE RETURNED IF UNSIGNED.	aging members	. A Manager, or if none, a Ma	anaging Member of the LLC must sign
2. If there are additional managers or managing members, attach a list of them to this form.			
<ol> <li>Annual list fee is \$125.00. A \$75.00 penalty must be added for failure to file this form by deemed an amended list for the previous year.</li> </ol>	the deadline. A	n annual list received more the	an 90 days before its due date shall be
4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for fail	lure to file form	by deadline.	
<ul><li>5. Make your check payable to the Secretary of State.</li><li>6. <u>Ordering Copies:</u> If requested above, one file stamped copy will be returned at no additional copy will be returned at no additional copy.</li></ul>	tional charge. T	o receive a certified copy, enc	ose an additional \$30.00 per certificatio
A copy fee of \$2.00 per page is required for each additional copy generated when ord accompany your order.	ering 2 or more	file stamped or certified copies	s. Appropriate instructions must
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City,	-		
<ol><li>Form must be in the possession of the Secretary of State on or before the last day of the received after due date will be returned for additional fees and penalties. Failure to inclu-</li></ol>	month in which de annual list ar	it is due. (Postmark date is no nd business license fees will re	ot accepted as receipt date.) Forms sult in rejection of filing.
ANNUAL LIST FILING FEE: \$125.00 LATE PENALTY: \$75.00			ATE PENALTY: \$100.00
Complete only if applicable  Pursuant to NRS, this corporation is exempt from the business license fe	е. Exemption	001 002 003	tion 7(2) Exemption Codes  Governmental Entity  501(c) Nonprofit Entity  Home-based Business  Natural Person with 4 or less
Month and year your State Business License expires: 1 2	20 1 (	005	- National Person With 4 or less rental dwelling units - Motion Picture Company - NRS 680B.020 Insurance Co.
NAME	. (	UMENT WILL BE REJECTED	IF TITLE NOT INDICATED)
HOOLAE PAOA		MANAGER N	MANAGING MEMBER
ADDRESS	CITY		STATE ZIP CODE
PMB 29 BOX 10001 , USA	SAIPAN		MP 96950
NAME	(DOCI	UMENT WILL BE REJECTED	IF TITLE NOT INDICATED)
		MANAGER N	MANAGING MEMBER
ADDRESS	CITY		STATE ZIP CODE
NAME	(DOCI	UMENT WILL BE REJECTED	IF TITLE NOT INDICATED)
			MANAGING MEMBER
ADDRESS	CITY		STATE ZIP CODE
NAME	(DOCI	UMENT WILL BE REJECTED	IF TITLE NOT INDICATED)
	, D		•
ADDRESS	CITY	WANAGER	MANAGING MEMBER STATE ZIP CODE
	1		
I declare, to the best of my knowledge under penalty of perjury, that the above menti-	nned entity has	complied with the previous	ns of sections 6 to 18 of AD 1/16 of
the 2009 session of the Nevada Legislature and acknowledge that pursuant to NRS 2 instrument for filing in the Office of the Secretary of State.	39.330, it is a c		ly offer any false or forged
<b>X</b> HOOLAE PAOA	Title	MANACED	Date 12/9/2010 9:43:55 PM
<u>^</u>		MANAGER	12/3/2010 3:45:55 PM



**ROSS MILLER** Secretary of State 202 North Carson Street Carson City, Nevada 89701-4201 (775) 684-5708 Website: www.nvsos.gov



### Statement of Resignation of **Registered Agent**

(PURSUANT TO NRS 77.370)

This form may be submitted by: a Commercial Registered Agent, Noncommercial Registered Agent or Represented Entity. For more information please visit http://www.nvsos.gov/index.aspx?page=141

USE BLACK INK ONLY - DO NOT HIGHLIGHT

Filed in the office of Document Number

Ross Miller

Secretary of State

State of Nevada

20110110728-73

Filing Date and Time

02/11/2011 11:00 AM

Entity Number

LLC13379-2001

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Name of Registered Agent:

### SANDY MARR

2. The above named registered agent resigns from serving as agent for service of process for the following entity(ies) and will send notice required by NRS 77.370 subsection 3 to the name and address stated for each. List entities in alphabetical order. Resigning agent may write "see attached list" in area below and attach a spreadsheet listing the entities in alphabetical order with required information provided.

Entity Name	Entity Number	Name and Address Where Notice Sent
ALL CAPITAL, LLC	LLC13640-2001	379 Tierras Blancos Ct., Las Vegas, NV 89138
ALL VERNON ACQUISITIONS, LLC	LLC2188-2004	379 Tierras Blancos Ct., Las Vegas, NV 89138
ATLAS CAPITAL PARTNERS, LLC	E214422009-1	Same as above
BANTER, INC.	C12685-1994	Same as above
BORDERTOWN COUNTRY, LLC	LLC806-1998	Same as above
BRIDGE AINA LEA, LLC	LLC1922-2001	Same as above
BRIDGE CAPITAL, INC.	C2306-1998	Same as above
BRIDGE CAPITAL, LLC	LLC2306-1998	Same as above
CALCASIEU VTN, INC.	C4036-1997	Same as above
CAPITAL FOODS, LLC	LLC12866-2002	Same as above
CAPITAL HOSPITALITY MGT., LLC	LLC17896-1997	Same as above
CAPITAL ONE, INC.	C17252-1995	Same as above
CAPITAL ONE, LLC	LLC4484-2001	Same as above
CAPITAL ONE INVESTORS, LLC	LLC3268-2002	Same as above
SEE ATTACHED LIST		

Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity

FEE: \$100.00 for the first entity and \$1.00 for each additional entity. (NRS 77.280)

**EFFECTIVE DATE:** This statement of resignation takes effect on the earlier of the 31st day after the day on which it is filed or the appointment of a new registered agent for the represented entity.

> Nevada Secretary of State Form RA Resignation Effective: 5-14-10

# Attachment to SANDY MARR 379 TIERRAS BLANCOS CT., LAS VEGAS, NV 89138 Statement of Resignation of Registered Agent

ENTITY NAME	ENTITY NUMBER
Capital Seven, LLC	LLC13379-2001
Capitol 7, LLC	LLC7803-2003
CasinosAsia, LLC	E0189742008-6
Creole Kitchen, Inc.	C3810-1998
DDI Ventures, Inc.	C2952-2002
DDRA Capital, Inc.	C2950-2002
Dayline, Inc.	C29313-1998
East Sunset, LLC	LLC2100-1997
Flamingo Palms, LLC	LLC10870-2001
Forest Home, LLC	LLC12672-2002
Gator Crossing, LLC	LLC1611-2000
Hana Makai, Inc.	C7981-1999
Hana Makai, LLC	LLC17688-2003
Heritage Group Trustees, LLC	E0267802007-8
Hoppin Hare, LLC	LLC6465-199
Hot Daze, Inc.	C12303-1997
Hot Daze, LLC	LLC12369-2001
Lucky Draw, LLC	LLC3487-2001
Nevada Financial Affiliates, LLC	LLC11461-2002
OBRC, LLC	E0498662009-1
PM Law, LLC	LLC1500-2004
Petrol Pit, LLC	LLC2378-2000
Running Rabbit, LLC	LLC6466-1999
Silver Beach, LLC	LLC24354-2004
Sleeping Deer, LLC	LLC6345-1999
South Hayden Investments, LLC	LLC8648-2003
Southern Nevada Trading, Inc.	C18532-1997
Southern Trading, LLC	LLC3331-1997
Sulphur Country, LLC	LLC1608-2000
Sunset Management, LLC	LLC4351-1999
Sunset Recovery, LLC	LLC15780-2002
Swamp Stop, LLC	LLC1612-2000

Talle Hoe, Inc.	C4337-1998
Toomey Stocks, LLC	LLC3330-1997
Tumon Partners, LLC	E0110112006-6
Valhalla Capital, LLC	LLC6980-2002
Vinton Racing, LLC	LLC5681-2000
Vinton, LLC	LLC14684-1996
Williamsburg Hospitality, LLC	LLC5073-2004
***Nothing Follows***	



ROSS MILLER Secretary of State 202 North Carson Street Carson City, Nevada 89701-4201 (775) 684 5708 Website: www.nvsos.gov

## Statement of Change of Registered Agent by Represented Entity

(PURSUANT TO NRS 77.340)

Filed in the office of Docur

Document Number

\_ 2

Ross Miller Secretary of State State of Nevada 20110110730-16

Filing Date and Time **02/11/2011 11:00 AM** 

Entity Number

LLC13379-2001

**USE BLACK INK ONLY - DO NOT HIGHLIGHT** 

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Name	of Entity as curre	ntly on file:	THE PROPERTY AND THE PROPERTY OF THE PARTY O		name o con action, who was a state fair o con an act also act or sink fair fair fair fair action as stated as the	our reference and suppression of the reservation and an extension of the reference of the r
Capital S	even, LLC		TAMES AND AND ASSESSMENT OF PROPERTY OF PROPERTY OF THE PROPER			
2. Entity	File Number:	LLC13	379-2001			•
3. Type o	of information bein	ng changed l	by this statement:	(check only one)		
X	hange of Comme	ercial Registe	ered Agent			
	hange of Name a	and Address	of Noncommercia	l Registered Agent		
	hange of Name, usiness Office of			n with Entity to who	m service is to be sent	and Address of the
4. Informa	ation in effect upo	on the filing o	of this statement:			
promotes	nercial Registered rp Services, Inc.	d Agent: (c	change requires a signe	ed registered agent acce	eptance)	
b) Nonco	ommercial Regist	ered Agent:	(change requires a s	igned registered agent a	cceptance)	muyayayin oras sarata hala ayandan mada alayan aha asa asa asa asa asa asa asa asa asa
and the second second	y Marr			orden orden in any orden out. I can have alleged as a sound see that a decrease desire in the cross out of the delivery		
Name			nyan kananan kananan kanan		The state of the s	[00120
379 1	Tierras Blancos C	t		Las Vegas	Nevada	Land and the second sec
Street A	Address			City		Zip Code
					Nevada	Landers
Mailing	Address (if different from	n street address)		City		Zip Code
c) Title o	f Office or Other	Position with	n Entity:			
Mana	iger					
Name o	f Title or Position					A CONTRACTOR OF THE CONTRACTOR
					Nevada	
Street A	Address	Market Control of Market for Total State of Control of	an the programmer and an extensive and the second a	City		Zip Code
PMB	29 Box 10001			Saipan	Nevada	96950
Mailing	Address (if different from	n street address)		City	And a point tag and an order or a control of the co	Zip Code
5. Signat	ure of Represent	Date	2/04/2011			
6. I hereb	y accept appoint	ment as Reg	gistered Agent for	the above named E	intity.	
X	111				Ma	rch 19, 2010
Authorized	Signature of Regis	tered Agent or	On Behalf of Registe	ered Agent Entity	Date	

FEE: \$60.00

ANNUAL LIST OF MANAGERS OR MANAGING MEMBERS OF THE PROPERTY OF	ERS AND	REGISTERED	
STATE BUSINESS LICENSE APPLICATION OF:  CAPITAL SEVEN, LLC			FILE NUMBER LLC13379-2001
NAME OF LIMITED-LIABILITY COMPANY			LLC13379-2001
FOR THE FILING PERIOD OF 12/2011 TO 12/20.	112	11	
**YOU MAY FILE THIS FORM ONLINE AT www.nvsos.gov**	112		
The entity's duly appointed registered agent in the State of Nevada upon whom process can	n be served is:	••	*110401*
INCORP SERVICES, INC. (Commercial Registered Agent)		Trib 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	C O D O O O O O O O O O O O O O O O O O
2360 CORPORATE CIRCLE STE 400		Filed in the off	20110876703-05
HENDERSON, NV 89074-7722 USA		· Za M	Filing Date and Time
		Ross Miller	12/13/2011 9:09 PM
		Secretary of St State of Nevad	
A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT: www.nv.	sos.gov		his document was filed electronically.)
USE BLACK INK ONLY - DO NOT HIGHLIGHT	turationa fila a		ABOVE SPACE IS FOR OFFICE USE ONLY
Return one file stamped copy. (If filing not accompanied by order institutions before completing and returning this form.	iruciions, ille s	iampeo copy wiii de s	ent to registered agent.)
Print or type names and addresses, either residence or business, for all manager or mans the form. FORM WILL BE RETURNED IF UNSIGNED.	aging members	A Manager, or if none	, a Managing Member of the LLC must sign
2. If there are additional managers or managing members, attach a list of them to this form.			
<ol> <li>Annual list fee is \$125.00. A \$75.00 penalty must be added for failure to file this form by deemed an amended list for the previous year.</li> </ol>	the deadline. A	n annual list received mo	ere than 90 days before its due date shall be
4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for fail	ilure to file form l	oy deadline.	
<ul><li>5. Make your check payable to the Secretary of State.</li><li>6. <u>Ordering Copies:</u> If requested above, one file stamped copy will be returned at no addit</li></ul>	tional charge. To	o receive a certified copy	r, enclose an additional \$30.00 per certification
A copy fee of \$2.00 per page is required for each additional copy generated when order accompany your order.	lering 2 or more	file stamped or certified of	copies. Appropriate instructions must
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City,			
<ol><li>Form must be in the possession of the Secretary of State on or before the last day of the received after due date will be returned for additional fees and penalties. Failure to include</li></ol>	month in <b>w</b> hich de annual list an	it is due. (Postmark date d business license fees i	will result in rejection of filing.
ANNUAL LIST FILING FEE: \$125.00 LATE PENALTY: \$75.00	<u>BUSINESS LI</u>	CENSE FEE: \$200.00	LATE PENALTY: \$100.00
Complete only if applicable			Section 7(2) Exemption Codes
Pursuant to NRS, this corporation is exempt from the business license fe	a Evamation	£*************************************	001 - Governmental Entity 002 - 501(c) Nonprofit Entity
Fulsdam to Nno, this corporation is exempt from the ousiness needs to	æ. Exemplion	1	003 - Home-based Business 004 - Natural Person with 4 or less
Month and year your State Business License expires:	20		rental dwelling units
			005 - Motion Picture Company 006 - NRS 680B.020 Insurance Co.
NAME	(DOCL	IMENT WILL BE REJEC	CTED IF TITLE NOT INDICATED)
HOOLAE PAOA		MANAGER	MANAGING MEMBER
ADDRESS	CITY		STATE ZIP CODE
PMB 29 BOX 10001 , USA	SAIPAN		MP 96950
NAME	(DOCL	IMENT WILL BE REJEC	CTED IF TITLE NOT INDICATED)
		MANAGER	MANAGING MEMBER
ADDRESS	CITY	<u> </u>	STATE ZIP CODE
NAME	(DOCL	IMENT WILL BE REJEC	CTED IF TITLE NOT INDICATED)
	<u> </u>	MANAGER	MANAGING MEMBER
ADDRESS	CITY		STATE ZIP CODE
NAME	(DOCI	IMENT WILL BE REJEC	CTED IF TITLE NOT INDICATED)
	, D	MANAGER	MANAGING MEMBER
ADDRESS	CITY	MANAGEN	STATE ZIP CODE
I declare, to the best of my knowledge under penalty of perjury, that the above mention	oned entity has	complied with the prov	visions of sections 6 to 18 of AB 146 of
the 2009 session of the Nevada Legislature and acknowledge that pursuant to NRS 23 instrument for filing in the Office of the Secretary of State.	39.330, it is a ca	stegory C felony to kno	wingly offer any false or forged
HOOLAE PAOA	Title		Date
X		MANAGER	12/13/2011 9:04:47 PM

#### ANNUAL LIST OF MANAGERS OR MANAGING MEMBERS AND REGISTERED AGENT AND STATE BUSINESS LICENSE APPLICATION OF: FILE NUMBER CAPITAL SEVEN, LLC LLC13379-2001 NAME OF LIMITED-LIABILITY COMPANY DEC, 2012 DEC, 2013 FOR THE FILING PERIOD OF TO \*\*YOU MAY FILE THIS FORM ONLINE AT www.nvsos.gov\*\* \*110405\* The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is: INCORP SERVICES, INC Filed in the office of Document Number 2360 CORPORATE CIRCLE STE 400 20120860827-86 HENDERSON, NV 89074-7722 Filing Date and Time Ross Miller 12/23/2012 5:06 PM Secretary of State Entity Number State of Nevada LLC13379-2001 A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT: www.nvsos.gov (This document was filed electronically USE BLACK INK ONLY - DO NOT HIGHLIGHT ABOVE SPACE IS FOR OFFICE USE ONLY Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.) IMPORTANT: Read instructions before completing and returning this form. 1. Print or type names and addresses, either residence or business, for all manager or managing members. A Manager, or if none, a Managing Member of the LLC must sign the form. FORM WILL BE RETURNED IF UNSIGNED. 2. If there are additional managers or managing members, attach a list of them to this form. 3. Return completed form with the fee of \$125.00. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year. 4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline. 5. Make your check payable to the Secretary of State 6. Ordering Copies: If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must 7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708. 8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing ANNUAL LIST FILING FEE: \$125.00 LATE PENALTY: \$75.00 BUSINESS LICENSE FEE: \$200.00 LATE PENALTY: \$100.00 CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW NRS 76.020 Exemption Codes 001 - Governmental Entity Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: 005 - Motion Picture Company 006 - NRS 680B.020 Insurance Co. NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees. (DOCUMENT WILL BE REJECTED IF TITLE NOT INDICATED) NAME JOHN K BALDWIN MANAGER MANAGING MEMBER STATE ZIP CODE ADDRESS CITY PMB 29 BOX 10001, MNP SAIPAN (DOCUMENT WILL BE REJECTED IF TITLE NOT INDICATED) NAME MANAGING MEMBER MANAGER **ADDRESS** CITY STATE ZIP CODE NAME (DOCUMENT WILL BE REJECTED IF TITLE NOT INDICATED) MANAGER MANAGING MEMBER **ADDRESS** CITY STATE ZIP CODE NAME (DOCUMENT WILL BE REJECTED IF TITLE NOT INDICATED) MANAGER MANAGING MEMBER **ADDRESS** CITY STATE ZIP CODE I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of NRS Chapter 76 and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State Title X JOHN K BALDWIN MANAGER 12/23/2012 5:06:43 PM

# INITIAL/ANNUAL LIST OF MANAGERS OR MANAGING MEMBERS AND STATE BUSINESS LICENSE APPLICATION OF:

ENTITY NUMBER

LLC13379-2001

CAPITAL SEVEN, LLC

FOR THE FILING PERIOD OF

NAME OF LIMITED-LIABILITY COMPANY

DEC, 2013

TO DEC, 2014



Document Number

Filing Date and Time

Entity Number

20130797222-45

LLC13379-2001

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12/05/2013 2:43 PM

110, 2011

#### USE BLACK INK ONLY - DO NOT HIGHLIGHT

### \*\*YOU MAY FILE THIS FORM ONLINE AT www.nvsilverflume.gov\*\*

Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

IMPORTANT: Read instructions before completing and returning this form

- Print or type names and addresses, either residence or business, for all manager or managing members. A Manager, or if none, a Managing Member of the LLC must sign the form. FORM WILL BE RETURNED IF UNSIGNED.
- 2. If there are additional managers or managing members, attach a list of them to this form
- 3. Return completed form with the fee of \$125.00. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
- 4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
- 5. Make your check payable to the Secretary of State
- 6. <u>Ordering Copies:</u> If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
- 7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708
- 8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

ANNUAL LIST FILING FEE: \$125.00 LATE PENALTY: \$75.00 (if filing late)

BUSINESS LICENSE FEE: \$200.00 LATE PENALTY: \$100.00 (if filing late)

Filed in the office of

Ross Miller

Secretary of State

State of Nevada

### CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW NRS 76.020 Exemption Codes 001 - Governmental Entity Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: 005 - Motion Picture Company 006 - NRS 680B.020 Insurance Co. NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees. NAME MANAGER OR MANAGING MEMBER JOHN K BALDWIN **ADDRESS** CITY STATE ZIP CODE PMB 29 BOX 10001, MNP SAIPAN 96950 NAME MANAGER OR MANAGING MEMBER **ADDRESS** CITY STATE ZIP CODE NAME MANAGER OR MANAGING MEMBER **ADDRESS** CITY STATE ZIP CODE NAME MANAGER OR MANAGING MEMBER **ADDRESS** CITY STATE ZIP CODE

None of the managers or managing members identified in the list of managers and managing members has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of a manager or managing member in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

V JOHNIK BALBAGAL			Title		Date				
X	JOHN K B	ALDWIN				MANAG	ER	12/5/2013 2:4	3:39 PM
=				 		***************************************		***************************************	

# INITIAL/ANNUAL LIST OF MANAGERS OR MANAGING MEMBERS AND STATE BUSINESS LICENSE APPLICATION OF:

ENTITY NUMBER

LLC13379-2001

CAPITAL SEVEN, LLC

NAME OF LIMITED-LIABILITY COMPANY

FOR THE FILING PERIOD OF DEC, 2014

2014 TO DEC, 2015



\*100401\*

Document Number

Filing Date and Time

Entity Number

20140828833-29

LLC13379-2001

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12/29/2014 5:07 PM

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### \*\*YOU MAY FILE THIS FORM ONLINE AT www.nvsliverflume.gov\*\*

Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

IMPORTANT: Read instructions before completing and returning this form

- Print or type names and addresses, either residence or business, for all manager or managing members. A Manager, or if none, a Managing Member of the LLC must sign the form. FORM WILL BE RETURNED IF UNSIGNED.
- 2. If there are additional managers or managing members, attach a list of them to this form
- 3. Return completed form with the fee of \$125.00. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
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- 8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

ANNUAL LIST FILING FEE: \$125.00 LATE PENALTY: \$75.00 (if filing late)

BUSINESS LICENSE FEE: \$200.00 LATE PENALTY: \$100.00 (if filing late)

Filed in the office of

Ross Miller

Secretary of State

State of Nevada

### CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW NRS 76.020 Exemption Codes 001 - Governmental Entity Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: 005 - Motion Picture Company 006 - NRS 680B.020 Insurance Co. NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees. NAME MANAGER OR MANAGING MEMBER JOHN K BALDWIN **ADDRESS** CITY STATE ZIP CODE PMB 29 BOX 10001, MNP SAIPAN 96950 NAME MANAGER OR MANAGING MEMBER **ADDRESS** CITY STATE ZIP CODE NAME MANAGER OR MANAGING MEMBER **ADDRESS** CITY STATE ZIP CODE NAME MANAGER OR MANAGING MEMBER **ADDRESS** CITY STATE ZIP CODE

None of the managers or managing members identified in the list of managers and managing members has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of a manager or managing member in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

V JOHNIK BALBAGA					Title	Date				
X	JOHN K B	ALDWIN					MANAGER		12/29/2014 5:07:15	5 PM
=					 		'		***************************************	

## INITIAL/ANNUAL LIST OF MANAGERS OR MANAGING MEMBERS AND STATE

ENTITY NUMBER

LLC13379-2001

LLC13379-2001

ABOVE SPACE IS FOR OFFICE USE ONLY

BUSINESS LICENSE APPLICATION OF: CAPITAL SEVEN, LLC NAME OF LIMITED-LIABILITY COMPANY DEC, 2016 DEC, 2015 FOR THE FILING PERIOD OF TO USE BLACK INK ONLY - DO NOT HIGHLIGHT \*\*YOU MAY FILE THIS FORM ONLINE AT www.nvsilverflume.gov\*\* Return one file stamped copy. (If filing not accompanied by order instructions, Filed in the office of Document Number file stamped copy will be sent to registered agent.) 20150542857-69 Barbora K. Cegarste IMPORTANT: Read instructions before completing and returning this form. Filing Date and Time Barbara K. Cegavske 1. Print or type names and addresses, either residence or business, for all manager or managing 12/13/2015 4:24 PM Secretary of State Entity Number

- members. A Manager, or if none, a Managing Member of the LLC must sign the form. FORM WILL BE RETURNED IF UNSIGNED.
- 2. If there are additional managers or managing members, attach a list of them to this form
- 3. Return completed form with the fee of \$150.00. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
- 4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline
- 5. Make your check payable to the Secretary of State
- 6. Ordering Copies: If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must
- 7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708
- 8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing

ANNUAL LIST FILING FEE: \$150.00 LATE PENALTY: \$75.00 (if filing late)

BUSINESS LICENSE FEE: \$200.00 LATE PENALTY: \$100.00 (if filing late)

State of Nevada

CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW  Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:  NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.						
NAME JOHN K BALDWIN	MANAGER C	DR MANAGING MEMBER				
ADDRESS	CITY	STATE ZIP CODE				
PMB 29 BOX 10001 , MNP	SAIPAN	96950				
NAME	MANAGER C	DR MANAGING MEMBER				
ADDRESS	CITY	STATE ZIP CODE				
NAME	MANAGER C	PR MANAGING MEMBER				
ADDRESS	CITY	STATE ZIP CODE				
NAME	MANAGER C	DR MANAGING MEMBER				
ADDRESS	CITY	STATE ZIP CODE				

None of the managers or managing members identified in the list of managers and managing members has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of a manager or managing member in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

37					Title		Date				
X	CARMENE	IASSELBACK						OFFICE MANAGER		12/13/2015 4:24:29 PM	
								4		***************************************	

## INITIAL/ANNUAL LIST OF MANAGERS OR MANAGING MEMBERS AND STATE BUSINESS LICENSE APPLICATION OF:

ENTITY NUMBER

LLC13379-2001

CAPITAL SEVEN, LLC
NAME OF LIMITED-LIABILITY COMPANY

FOR THE FILING PERIOD OF

DEC, 2016

TO DEC, 2017



Document Number

Filing Date and Time

20160495778-19

LLC13379-2001

11/13/2016 4:28 PM

\*1

USE BLACK INK ONLY - DO NOT HIGHLIGHT

### \*\*YOU MAY FILE THIS FORM ONLINE AT www.nvsliverflume.gov\*\*

Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

IMPORTANT: Read instructions before completing and returning this form.

- Print or type names and addresses, either residence or business, for all manager or managing members. A Manager, or if none, a Managing Member of the LLC must sign the form. FORM WILL BE RETURNED IF UNSIGNED.
- 2. If there are additional managers or managing members, attach a list of them to this form
- 3. Return completed form with the fee of \$150.00. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
- ABOVE SPACE IS FOR OFFICE USE ONLY

Entity Number

- 4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline
- 5. Make your check payable to the Secretary of State
- 6. <u>Ordering Copies:</u> If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
- 7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708
- 8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

ANNUAL LIST FILING FEE: \$150.00 LATE PENALTY: \$75.00 (if filing late)

BUSINESS LICENSE FEE: \$200.00 LATE PENALTY: \$100.00 (if filing late)

Filed in the office of

Barbara K. Cegavske

Secretary of State

State of Nevada

Barbora K. Cegarste

CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW  Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:  NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.					
NAME JOHN K BALDWIN	MANAGER (	OR MANAGING MEMBER			
ADDRESS PMB 29 BOX 10001 , MNP	CITY SAIPAN	STATE ZIP CODE 96950			
NAME	MANAGER (	OR MANAGING MEMBER			
ADDRESS	CITY	STATE ZIP CODE			
NAME	MANAGER (	OR MANAGING MEMBER			
ADDRESS	CITY	STATE ZIP CODE			
NAME	MANAGER (	OR MANAGING MEMBER			
ADDRESS	CITY	STATE ZIP CODE			

None of the managers or managing members identified in the list of managers and managing members has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of a manager or managing member in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

V JOHN K BA BAGN							Title	Date
<u>X</u>	JOHN K BALDV	VIN					MANAGER	11/13/2016 4:28:26 PM
==				-				