F18000000613

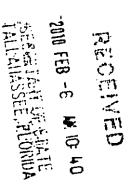
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT	MAIL				
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of	Status				
Special Instructions to Filing Officer:					

Office Use Only



000308842170







CORPORATION SERVICE COMPANY 1201 Hays Street

CERTIFIED COPY
PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195							
REFERENCE : 059143 4812821							
AUTHORIZATION : Loudelle mon							
COST LIMIT : 05 70.00							
ORDER DATE : February 5, 2018							
ORDER TIME : 9:36 AM							
ORDER NO. : 059143-005							
CUSTOMER NO: 4812821							
FOREIGN FILINGS							
NAME: LUNE ROUGE EVENTS MIAMI INC.							
XXXX QUALIFICATION (TYPE: CO)							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							

EXAMINER:

COVER LETTER

то:	Registration Sec Division of Corp				
SUBJ	IECT:	Lune Ro	uge Eve	nts Miami Inc.	
~ ~ ~ ~ ~		Name of corporation			
Dear S	Sir or Madam:				
"Certi	ficate of Existence	on by Foreign Corporation for the conference of Good State	anding"	and check are sub	
Please	return all corresp	ondence concerning this mat	ter to the	following:	
Andr	ei Molchynsky				
	····	Name o	of Person		
Lune	Rouge				
	. <u> </u>	Firm/Co	npany		
2200	rue Stanley, 3 e	tage			
	•		dress		
Mont	real QC_H3A 1F	₹6			
		City/State	and Zip	code	
amol	chynsky@lunero	uge.com			
		E-mail address: (to be use	d for futi	ire annual report r	otification)
For fu	irther information	concerning this matter, pleas	e call:		
lame	mes La <u>cey</u> at (212) 318-3189		189		
Jann	Name of Person Area Code Daytime Telephone Number				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclo	sed is a check for	the following amount:			
≅ \$7	70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status		75 Filing Fee & ified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1.	Lune Rouge Events	: Miami Inc.	
(Enter name of co	Lune Rouge Events rporation; must include "INCORPORATED," "(rp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATION,"	
(If name unavaila	ble in Florida, enter alternate corporate name ado	pted for the purpose of transacting bu	siness in Florida)
Delaware (State or country)	under the law of which it is incorporated)	(FEI number, if applica	ble)
4 January 10, 2			
(Date	2018 5 5	(Date of duration, if other than	perpetual)
6.			(C)
c	(Date first transacted business in F. (SEE SECTIONS 607.1501 & 607.1502	lorida, if prior to registration) , F.S., to determine penalty liability)	
7 2200 aug Stant	ey, 3 etage, Montreal QC, H3A 1R6		7
7. <u>2200 fde Starii</u>	(Principal	office address)	2 0
		address, if different)	28
8. Name and street	t address of Florida registered agent: (P.O.	Box NOT acceptable)	•
Name:	Corporation Service Company	_	
Office Address:	1201 Hays Street		
	Tallahassee (City)	, Florida <u>32301</u> (Zip code)	
	(City)	(Elp code)	
designated in this	ent's acceptance: ned as registered agent and to accept service application, I hereby accept the appointme omply with the provisions of all statutes rel familiar with and accept the obligations of i	nt as registered agent and agree t ative to the proper and complete p	o act in this capacity. I performance of my
		_	Roxanne Turner
C	Corporation Service Company)	Asst. Vice President
	(Registered ag	ent's signature)	

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Vice Chairman: Director: Guy Laliberté ___ Address: 2200 rue Stanley, 3 etage, Montreal QC, H3A 1R6 Director: Robert Blain _____ Address: 2200 rue Stanley, 3 etage, Montreal QC, H3A 1R6 **B. OFFICERS** President: Robert Blain _______ Address: 2200 rue Stanley, 3 etage, Montreal QC, H3A 1R6 Vice President: Stephane Mongeau Address: 2200 rue Stanley, 3 etage, Montreal QC, H3A 1R6 Secretary: Catherine Vu Address: 2200 rue Stanley, 3 etage, Montreal QC, H3A 1R6 Treasurer: Catherine Vu Address: 2200 rue Stanley, 3 etage, Montreal QC, H3A 1R6 NOTE: If necessary, you may attach an adjendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

Robert Blain

LIST OF ADDITIONAL DIRECTORS

Catherine Vu 2200 rue Stanley, 3 etage Montreal QC, H3A 1R6



Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "LUNE ROUGE EVENTS MIAMI INC." IS DULY

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

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE FIFTH DAY OF FEBRUARY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LUNE ROUGE EVENTS MIAMI INC." WAS INCORPORATED ON THE TENTH DAY OF JANUARY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 202094972

Date: 02-05-18