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PICK-UP WAIT MAIL					
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Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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Tempolitical Light

COVER LETTER

TO: New Filing Section Division of Corporations							
SUBJECT: Bridge LBN, Inc.							
Name of corporation - must include suffix							
Dear Sir or Madam:							
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact but							
Please return all correspondence concerning this m	eatter to the following:						
Jackie Kalnins							
Nam	e of Person						
Firm/	Company						
4310 Harbor Lake Dr							
•	Address						
Lutz, FL 33558	17'						
·	ate and Zip code						
jackalnins@aol.com E-mail address: (to be u	sed for future annual report notification)						
For further information concerning this matter, plea	-						
Jackie Kalnins at (813	\ 767-4312						
Name of Person Area Code & Daytime Telephone Number							
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314						
Enclosed is a check for the following amount:							
☑ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy						

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

				TATUTES, THE FOLLOWING IS SUBM		TO	
	Bridge LBN, In		TI	BUSINESS IN THE STATE OF FLORID	ALIA ROSS	2010 (
	(Enter name of c "Inc.," "Co.," "C	orporation; must include "INCORPORAT orp," "Inc," "Co," or "Corp.")	ED.	," "COMPANY," "CORPORATION,"		CT 26	
					21.05	<u> </u>	
	(If name unavails	able in Florida, enter alternate corporate na	ıme	adopted for the purpose of transacting busing	ness in Ele	•	
2.	Delaware		3.	27-3401284	<u> </u>	9	
	(State or country	under the law of which it is incorporated)		(FEI number, if applicable))		
4.	September 2,	2010	5.	perpetual			
	(Date	of incorporation)		(Duration: Year corp. will cease to exist of	or "perpet	ual")	
6.							
7.	4310 Harbor La	(SEE SECTIONS 607.1501 & 60 ke Drive Lutz, Florida 33558	7.1	n Florida, if prior to registration) 502, F.S., to determine penalty liability)			
		(Principal office	add	lress)			
	4310 Harbor Lake Drive Lutz, Florida 33558						
		(Current mailing	add	iress)			
8.	On line video g				,		
	(Purpose(s) of corporation authorized in home state of	or co	ountry to be carried out in state of Florida)			
9.	Name and stree	et address of Florida registered agent: (P.C	D. Box NOT acceptable)			
	Name:	Jackie Kalnins					
Oi	ffice Address:	4312 Harbor Lake Dr		*****			
		Lutz		, Florida 33558			
		(City)		(Zip code)			

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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)

11. 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.

12. Names and business addresses of officers and/or directors:

. A. DIRECTORS	
Chairman: John Zumwalt	
Address: 4310 Harbor Lake Dr	
Lutz, FL 33558	
Vice Chairman:	26 B R
Address:	26
Director: Milind Bharvirkar	9
Address: 4310 Harbor Lake Dr	(D)
Lutz, FL 33558	
Director:	
Address:	
B. OFFICERS	
President: Milind Bharvirkar	
Address: 4310 Harbor Lake Dr.	
Lutz, FL 33558	
Vice President:	
Address:	
Secretary: John Colby	
Address: 4310 Harbor Lake Dr Lutz FL 33558	
Treasurer: John Colby	
Address: 4310 Harbor Lake Dr. Lutz FL 33558	
NOTE: If necessary, you may attach an addendam to the application listing additional of	officers and/or directors.
13. (Signature of Director or Officer listed in number 12 of the application)	ation)
\sim 1.1. \sim 1.	President
(Typed or printed name and capacity of person signing application)	(n)

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "BRIDGE LBN, 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 FIFTEENTH DAY OF

SEPTEMBER, A.D. 2010.

PILED

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MECHANASSE FLOREN,

1867548 8300

100904425

AUTHENTY CATION: 8229920

DATE: 09-15-10

You may verify this certificate online at corp.delaware.gov/authver.shtml