F160005520

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





700292858337

12/13/16--01016--011 **70.00

16 0EC 13 PH 4: 06

T WASHINGTON
DEC 1 4 2016

COVER LETTER

TO:	Registration Sec Division of Corp						
SUBJE	ECT:	GL EVENTS	USA. INC.				
JC BOL		Name of	f corporation	- must ii	clude suffix	- Total Control of the Control of th	
Dear Si	r or Madam:						
"Certifi	cate of Existence		of Good Stand	ding" an	d check are subi	t Business in Florida," mitted to register the	
Please i	return all correspo	ondence concernin	ng this matter	to the fo	ollowing:		
Р. Т	'RISTAN BOUF	RGOIGNIE, ESQ					
			Name of P	Person			
TR	RISTAN BOURG	GOIGNIE, P.A.					
		3.5.1.1.2,1.1.1.1	Firm/Comp	pany			
E0'	75 CLINICET DD	IME CHITE 602					
	75 SUNSET DR	IVE, SUITE 603	Addre	SS			
S	OUTH MIAMI,	FI. 33143	City/State an	d Zin ee		-	
			•	ia zip ci	de		
	PTB@MIAN	<u>41-DROIT.COM</u> E-mail address:	(to be used for	or future	annual report ii	otification)	
For fur	ther information	concerning this ma				,	
Т. В	OURGOIGNIE	, ESQ.	at (305)	200 -0350		
	Name of Persor		Area Code	·	Daytime Telepl	none Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			S:	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee. FL 32314			
Enclose	ed is a check for	the following amo	unt:				
□ \$70	.00 Filing Fee	□ \$78.75 Filing Certificate o			Filing Fee & ed 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.

2. <u>DELAWAR</u>	E 3. v under the law of which it is incorporated)	87-0672037		
(State or country	under the law of which it is incorporated)	(FEI number, if ap	oplicable)	
4. <u>FEBRUAR</u>	7 8, 2001 5.			
(Date	of incorporation)	5. (Date of duration, if other		
6.				
- LOON DICC	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	602, F.S., to determine penalty liabil	ity)	
7. 100 N. BISC	AYNE BLVD, SUITE 1105, MIAMI, F	L 33143 al office address)	<u> </u>	
	(Princip	ai office address)		
	(Current mailin	g address, if different)	$\mathbb{Z}_{\mathbb{Z}_{2}}^{2}\subseteq \mathbf{\omega}$ \mathbb{T}	
	(0 2.00.0		R E	
Name and stree	t address of Florida registered agent: (P.C			
8. Name and <u>stree</u> Name:	·			
Name:	t address of Florida registered agent: (P.C			
	t address of Florida registered agent: (P.C TRISTAN BOURGOIGNIE, P.A. 5975 SUNSET DRIVE, SUITE 603			

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.

(Registered agent's signature)

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

A. DIRECTORS

Chairman: Olivier GINON			
Address: 100 N. Biscayne Blvd, Suite 1105, Miami, FL 33131	 		
Vice Chairman: Gilles GQUEDARD-COMTE			
Address: 100 N. Biscayne Blvd, Suite 1105, Miami, FL 33131			
Director: Erick ROSTAGNAT			
Address: 100 N, Biscayne Blvd, Suite 1105, Miami, FL 33131			
Director:			
Address:		16	
B. OFFICERS	3 - 2	1 330	<u></u>
President: Olivier GINON		$\overline{\omega}$	[T]
Address: 100 N. Biscayne Blvd, Suite 1105, Miami, FL 33131	5351	1	Ö
Vice President:Gilles GOUEDARD-COMTE	현류	99	
Address: 100 N. Biscayne Blvd, Suite 1105, Miami, FL 33131			
Secretary:Erick ROSTAGNAT			
Address: 100 N. Biscayne Blvd, Suite 1105, Miami, FL 33131			
Treasurer: Gilles GOUEDARD-COMTE		· ———	
Address:100 N. Biscayne Blvd, Suite 1105, Miami, FL 33131			
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/o	r directors.		
Signature of Director or Officer			
The officer or director signing this document (and who is listed in number 11 above) affirms that the are true and that he or she is aware that false information submitted in a document to the Department a third degree felony as provided for in s.817.155, F.S.			
11 Friel POCTACNAT Cocretary			

Delaware

The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "GL EVENTS USA, 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 TWENTY-SIXTH DAY OF SEPTEMBER, A.D.

2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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

16 DEC 13 PM 4: 07

Agao Ciro

Authentication: 203060456

Date: 09-26-16

3353169 8300 SR# 20165947572

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