F170000476S

(Requestor's Name)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
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D SCOTT

COVER LETTER

TO:	Registration Section Division of Corporations					
	Bonaventure Inc.					1
SUB	IECT:					<u> </u>
		Name of corpora	ion - mu	st include suffix		
Dear S	Sir or Madam:					
"Certi	nclosed "Application by For ficate of Existence," or "Cen referenced foreign corporat	tificate of Good ?	Standing	" and check are sul		
	return all correspondence c s Morales	oncerning this ma	itter to th	ne following:		
Bonav	enture Inc. DBA Bonaventure		of Perso	π		
17291	Irvine Blvd, Suite 158	Firm/C	Company			
Tustin	. CA 92780	A	ddress		, <u>-</u>	†
thanky	ou@andresmorales.com	City/Sta	te and Zi	p code	·	55
	E-mail	address: (to be us	ed for fu	ture annual report	notification)	_
For fu	rther information concerning	g this matter, plea	se call:			() ()
Andres Morales		949 at (· ·	-)
	Name of Person	Area (Code	Daytime Telep	bhone 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 follow	ng amount:				
□ \$7		5 Filing Fee & ficate of Status		3.75 Filing Fee & tified Copy	\$87.50 Fi Certifica Certified	te of Status &

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. Bonaventure Inc. 1. (Enter name of corporation: must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") Bonaventure Inc. Dba Bonaventure Realtors, or Movved (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 20-8615171 California (FEI number, if applicable) (State or country under the law of which it is incorporated) (Date of incorporation) (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 417 NW 47th St, Fort Lauderdale, FL 33309 (Principal office address) 17291 Irvine Blvd, Suite 158, Tustin, CA 92780 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Jim Masud Name: 417 NW 47th St Office Address: Fort Lauderdale (City)

9. 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)

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:		1		
A. DIRECTORS Andres Morales				
Chairman: 17291 Irvine Blvd, Sutic 158, Tustin, CA 92780			1	-
Address:			1	-
Vice Chairman:		- 1		_
Address:	.			-
Director:		1		İ
		<u> </u>		i
Address:				
Director:				-
Address:				_
B. OFFICERS Andres Morales			<u>}</u>	-
President:			<u> </u>	- }
Address:			1	- !
Vice President:	•	-	4 -	<u>-</u> -
Address:	· -	- 1	•	_
Andres Morales			<u> </u>	-
Secretary:	<u>.</u>	:	<u> </u>	_
17291 Irvine Blvd, Suite 158, Tustin, CA 92780 Address:		<u> </u>		
Treasurer:				_
Address:			<u> </u>	_
NOTE: If necessary, you may attach an addendum to the application listing additional off	icers and/	or director	rs.	
12.		<u>-</u>	· · ·	_
Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirm are true and that he or she is aware that false information submitted in a document to the D a third degree felony as provided for in s.817.155, F.S.				
Andres Morales, President 13.				

(Typed or printed name and capacity of person signing application)

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

BONAVENTURE INC.

FILE NUMBER:

C2971603

FORMATION DATE:

02/05/2007

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of August 02, 2017.

ALEX PADILLA Secretary of State