F21000005739

(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



800374038808

09/29/21--01009--002 **70.00



SH 11/7/21

COVER LETTER

TO:	Registration Se Division of Cor					
SURJ	ECT:	BRIDO	GEVIEW EN	TERTAINMENT INC.		
., ., .,.,		Name of	corporation	- must include suffix		
Dear S	Sir or Madam:					
"Certi	ficate of Existenc	ion by Foreign Corpe e," or "Certificate of n corporation to trans	Good Stanc	Authorization to Transact Business ling" and check are submitted to r s in Florida.	s in Flor egister t	ida," he
Please	return all corresp	ondence concerning	this matter	to the following:		
		В	IGUNO PIEI	RRE		
			Name of F	erson		
		-	112 (6)			
		,	Firm/Comp	*		
				TARY TRAIL.		_~_
			Addres		-	(B)
				BEACH, FL 33409		SCI
			lity/State an	•	•	2 2
				e@gmail.com		Φ_
		E-mail address: (t	o be used fo	r future annual report notification)	P
For fur	ther information	concerning this matte	er, please ca	lt:		៤: ១8
BIC	JUNO PIERRE	at t	954	319-6214		œ
	Name of Persor		Area Code	Daytime Telephone Numb	ner	
	Registration Sec Division of Corp The Centre of Ta	ourations allahassee : Street, Suite 810		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Ft. 32314		
Please n		he following amount to: FLORIDA DEPA \$78.75 Filing For Certificate of Si	RTMENT (\$78.75 Filing Fee & S87.5 Certified Copy Certi		f 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.

(If name unavail	able in Florida, enter alternate corporate nan	ne adopted for the purpose of transacting b	usiness in Florida)	
HAWAII		87-2508164		
(State or country under the law of which it is incorporated)		(FEI number, if applicable)		
4/30/2018	:	PERPETUAL 5.		
(Date	of incorporation)	(Date of duration, if other than	(Date of duration, if other than perpetual)	
	(SEE SECTIONS 607.1501 & 607.	in Florida, if prior to registration) 1502, F.S., to determine penalty liability)		
	1268 N MILITARY TR	AIL WEST PALM BEACH, FL 33409	_	
	(Current mai	ling address, if different)		
Name and <u>stree</u> Name:	et address of Florida registered agent: (F BIGUNO PIERRE	P.O. Box <u>NOT</u> acceptable)	3821	
Name:		P.O. Box <u>NOT</u> acceptable)	7021 SEP	
Name:	BIGUNO PIERRE	33409	7821 SEP 29	
	BIGUNO PIERRE 1268 N MILITARY TRAIL	P.O. Box NOT acceptable) , Florida 33409 (Zip code)	1821 SEP 29 PH	
Name: fice Address: Registered ag	BIGUNO PIERRE 1268 N MILITARY TRAIL WEST PALM BEACH	, Florida 33409(Zip code)	2021 SEP 29 PH 4:	

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

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

A. DIRECTORS				
Chairman Name: BIGUNO PIERRE		□ Chairman	Name: 1268 N MILITARY TRAIL. Address:	
		□Vice Chairman		
Director WEST PALM BEACH, FL 33409		□Director	WEST PALM BEACH, FL 33409	
President		□President		
Vice President		■Vice President		
Secretary	■ Treasurer	□Secretary	□Treasurer	
Other	□Other	Other	□Other	
lChairman	Name:	□Chairman	Name:	
Vice Chairman	Address:	□Vice Chairman	Address;	
Director		ElDirector		
President	·	□President		
Vice President		□Vice President		
Secretary	☐Treasurer	☐ Secretary	□Treasurer	
Other	Other	□Other	Other	
Chairman	Name:	□Chairman	Name:	
Vice Chairman	Address:	□Vice Chairman	Address:	
Director		Director	. 0	
President		□ President	149	
Vice President		□Vice President		
secretary	□Treasurer	☐ Secretary	☐ Treasurer	
Other	Other	[]Other	□Other	
portant Notice: Uividuals may be	Use an attachment to report more than six (6). The added to the index when filing your Florida Department of Direct Stenature of Direct	rtment of State Annual Rep	I for reporting purposes only, Non-indexed port form,	
e officer or directs is aware that fall 17.155, F.S.	tor signing this document (and who is listed in nur lse information submitted in a document to the De	nber 11 above) affirms tha	it the facts stated herein are true and that he	
	BIGUNO PIERRE (Typed or printed name and capacity of p	PRESIDENT		



Department of Commerce and Consumer Affairs

CERTIFICATE OF GOOD STANDING

I, the undersigned Director of Commerce and Consumer Affairs of the State of Hawaii, do hereby certify that according to the records of this Department,

BRIDGEVIEW ENTERTAINMENT INC.

was incorporated under the laws of Hawaii on 04/30/2018; and that it is an existing corporation in good standing, and is duly authorized to transact business.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of the Department of Commerce and Consumer Affairs, at Honolulu, Hawaii.

Dated: September 07, 2021

Catan. P. awat Cala

Director of Commerce and Consumer Affairs