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TO: Amendme	ent Section Division of Corporation	ons					
BRIDG	GEVIEW ENTERTAINMENT IN	NC .					
SUBJECT:	Name	of Corporation					
DOCUMENT NU	MBER: F21000005739	•					
	ndment and fee are submitted for	filing.					
Please return all co	rrespondence concerning this ma	tter to the followin	g:				
BIGUNO PIERRE							
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	City/State and Zip Code		_				
corpbigunopierre@	gmail.com_tomrich123@gmail.	.com					
E-mail addre	ss: (to be used for future annual re	eport notification)			, ,	207	
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BIGUNO PIERRE		561 at (385-4027		٠.	L-3	, ,2
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Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

F21000005739

	(Document	number of corporation (if known)		
BRIDGEVIEW ENTER				
	(Name of corporation as it	appears on the records of the Depart		
HAWAII	.).			
(In-	corporated under laws of)	(Date author	ized to do business in F	lorida)
	(4-7 COMPLETE (SECTION II ONLY THE APPLICABLE CHA	NGES)	
N.T.L.A.	ges the name of the corporation, w	when was the change effected under	the laws of its jurisdiction	on of
N/A				
(Name of corporation a not contained in new na	ifter the amendment, adding suffi- ame of the corporation)	x "corporation," "company," or "inco	orporated," or appropria	te abbreviation
		porate name adopted for the purpose	e of transacting business	s in Florida)
If the amendment of	changes the period of duration, in	dicate new period of duration.		
	N/A		· "	202
		(New duration)		7.32.7
If the amendment o	changes the jurisdiction of incorpo	oration, indicate new jurisdiction.	•	
		(New jurisdiction)	· : .	9. ~. 35
If amending the regist new registered agent a	ered agent and/or registered off and/or the new registered office	fice address in Florida, enter the n address:	ame of the	
Name of New Regis	stered Agent N/A			
		orida street address)		
New Registered Offic	e Address: N/A		_, Florida	
		(City)	(Zip Code)	
I hereby accept the appo	t's Signature, if changing Regist ointment as registered agent. I a nature of New Registered Agent, if c	m familiar with and accept the oblig	gations of the position.	

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change: Title/ Capacity Name Address Type of Action VΡ FRANCKY ARCHELUS 1411 SUMMIT RUN CIR \square Add WEST PALM BEACH, FLORIDA 33415 VP YANESHA OLDONOR 4781 N CONGRESS AVE STE 1186 ☑Add Boynton Beach, Florida 33426 Remove \square Add Remove □Add

FILING FEE \$35.00