## F04000005895

UU 18	4-04011-004
(Req	uestor's Name)
(Add	ress)
(Add	ress)
(City)	/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Busi	iness Entity Name)
(Doc	ument Number)
Certified Copies	Certificates of Status
Special Instructions to F	iling Officer:
	(US
	Office Use Only
	20 CHOT



700041201047

09/24/04--01029--004 \*\*78.75

MJH :

FILED 040CT 14 PH 4: 43

## TRANSMITTAL LETTER

	gistration S vision of Co								
SUBJEC	T: NewWa	ave Technologies, Ir	nc.						
	<del></del>			on - must	include suffix)	)			
Dear Sir o	· Madam:								
"Certificat							siness in Florida," foreign corporation to		
Please retu	rn all corres	pondence concernir	ng this matter	r to the fol	lowing:				
William C.	Cordell								
			(Name of	f Person)					
NewWave	Technologie	es, Inc.							
			(Firm/Co	mpany)					
200 Girard	Street								
			(Addı	ress)					
Gaithersbu	rg, MD 208	77							
			(City/State	and Zip co	ode)				
For further	information	concerning this ma	atter, please c	eall:					
William C.	Cordell	í	at ( 301	948-5	5222 ext 227				
(N	ame of Pers			Code & D	aytime Teleph	one N	lumber)		
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399				MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314					
Enclosed is	a check for	the following amou	ınt:						
<b>⊐</b> \$70.00 i	Filing Fee	X \$78.75 Filing Certificate of		\$78.75 F Certified	filing Fee & d Copy		\$87.50 Filing Fee, Certificate of Status & Certified Copy		



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 1, 2004

WILLIAM C CORDELL NEWWAVE TECHNOLOGIES, INC. 200 GIRARD STREET GAITHERSBURG, MD 20877

SUBJECT: NEWWAVE TECHNOLOGIES, INC.

Ref. Number: W04000036282

We have received your document for NEWWAVE TECHNOLOGIES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Michelle Hodges Document Specialist

Letter Number: 004A00057378

## 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.

1.	NewWave Tech	nnologies, Inc.							
		orporation; must include "INCORPORAT orp," "Inc," "Co," or "Corp.")	ED	," "COMPANY," "CORPORATION,"					
	NWT Distribution								
	(If name unavaila	ible in Florida, enter alternate corporate n	ame	adopted for the purpose of transacting business in Florid	la)				
2.	Maryland		3.	52-1777455					
	(State or country under the law of which it is incorporated)			(FEI number, if applicable)					
4	04/23/1993		5.	perpetual					
•		of incorporation)		(Duration: Year corp. will cease to exist or "perpetual	")				
6.	10-1-2004								
				n Florida, if prior to registration)					
		(SEE SECTIONS 607.1501 & 60	97.1	502, F.S., to determine penalty liability)					
7.	200 Girard Stree	et, Gaithersburg, MD 20877							
		(Principal office	add	ress)					
	200 Girard Stree	et, Gaithersburg, MD 20877							
		(Current mailing	ado	lress)					
8.	Distributor of De	ocument Imaging Hardware, Software,	, an	- i	70				
Ψ,	(Purpose(s	of corporation authorized in home state of	or c	ountry to be carried out in state of Florida)	7				
9.	Name and stree	t address of Florida registered agent:	(P.C		04 OCT 114 PH 1:43				
	Name:	Roger Hughes			물				
O	ffice Address:	1264 Coverstone Ct.		FLORIBA	£# :#3	<u> </u>			
		Oldsmar,		, Florida 34677					
		(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.

Roger Hughes

Registered agent's somature)

- 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: