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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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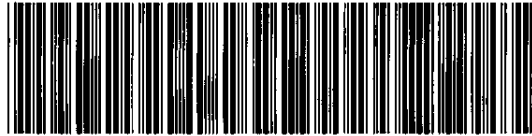
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2009 MAY 18 P 3:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Watershape Consulting, Inc.

Name of corporation - must include suffix

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

David Peterson

Name of Person

Watershape Consulting, Inc.

Firm/Company

3830 Valley Centre Dr, Ste 705-316

Address

San Diego, CA 92130-3320

City/State and Zip code

dave@watershapeconsulting.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David J. Peterson

Name of Person

at (858) 720-1001

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified 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.*

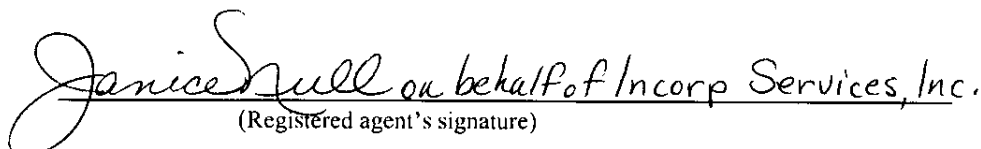
1. Watershape Consulting, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. California 3. 76-0761559
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 4/7/2004 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Not Applicable
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 3830 Valley Centre Drive, Ste 705-316 San Diego, CA 92130-3320
(Principal office address)

3830 Valley Centre Drive, Ste 705-316 San Diego, CA 92130-3320
(Current mailing address)
8. Professional engineering & design for pools, spas and water features.
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: InCorp Services, Inc.

Office Address: 17888 67th Court North
Loxahatchee, Florida 33470
(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.


(Registered agent's signature)

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.

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Howard Jennings Peterson

Address: 11139 Bixler Place

Grass Valley, CA 95949-8712

Director: _____

Address: _____

B. OFFICERS

President: David Peterson

Address: 4908 Brookburn Dr

San Diego, CA 92130-2778

Vice President: Laurie Jean Howard

Address: 4730 Rancho Del Mar Trail

San Diego, CA 92130-5210

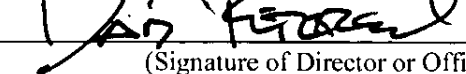
Secretary: Jennifer Marion Peterson

Address: 4908 Brookburn Dr, San Diego, CA 92130-2778

Treasurer: Laurie Jean Howard

Address: 4730 Rancho Del Mar Trail, San Diego, CA 92130-5210

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Director or Officer listed in number 12 of the application)

14. David Peterson, President/CEO
(Typed or printed name and capacity of person signing application)

State of California
Secretary of State

CERTIFICATE OF STATUS

FILED
2009 MAY 18 P 3 43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ENTITY NAME:

WATERSHAPE CONSULTING, INC.

FILE NUMBER: C2582379
FORMATION DATE: 04/07/2004
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, 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 March 02, 2009.

Debra Bowen

DEBRA BOWEN
Secretary of State