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| (Requestor's Name)                      |  |  |  |  |
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| (Address)                               |  |  |  |  |
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| (Address)                               |  |  |  |  |
| (121.225)                               |  |  |  |  |
|   |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |
|   |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |
| (Dusiness Entry Name)                   |  |  |  |  |
|   |  |  |  |  |
| (Document Number)                       |  |  |  |  |
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| Certified Copies Certificates of Status |  |  |  |  |
|   |  |  |  |  |
| Considerations to Filling Offi          |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |
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## **COVER LETTER**

|                      | ew Filing Sect<br>Pivision of Cor  |  |   |  |                 |                 |
|----------------------|--|--|---|--|-----------------|-----------------|
| SUBJEC               | T: VA  | lowave                                       |   |  |                 |                 |
| SUBOLIC              | · · · · · · · · · · · · · · · · · · ·  | Name of corporati                            | ion - must include suffix   |  |                 |                 |
| Dear Sir o           | or Madam:  |  |   |  |                 |                 |
| "Certificat          | te of Existence  |  | or Authorization to Transact tanding" and check are subminess in Florida.       |  |                 |                 |
| Please retu          | urn all corresp  | ondence concerning this mat                  | ter to the following:   |  |                 |                 |
|                      |  | Stephen L. R                                 | CUSSO   |  |                 |                 |
|                      |  | Name   | of Person   |  |                 | <del></del>     |
|                      |  | Velow  | vave  |  |                 |                 |
|                      | · ··- · · · · · · · · · · · · · · · · ·  |  | ompany  |  | <u></u>         | <del></del>     |
|                      |  | 256 N. Over                                  | 1 Blvd.   |  |                 |                 |
|                      |  | Ad   | dress   |  |                 | _               |
|                      |  | orem, UT                                     | 84097   |  |                 |                 |
|                      | <u> </u>   | City/State                                   | e and Zip code  |  |                 | _               |
|                      |  | SN15500                                      | OVELOWAVE. net<br>ed for future annual report no                                |  |                 |                 |
|                      |  | E-mail address: (to be use                   | ed for future annual report no  | tification)                                      |                 |                 |
| For furthe           | er information   | concerning this matter, pleas                | e call:   |  |                 |                 |
| Kris<br>N            | SSA Aller<br>Name of Person  |  | 200 - 8356<br>ea Code & Daytime Telephor  |  | 2010 HAY        | JISIA10         |
| No<br>Di<br>Ci<br>26 | TREET/COU<br>ew Filing Sect<br>ivision of Corp<br>lifton Building<br>661 Executive<br>allahassee, FL | porations<br>Center Circle                   | MAILING AD<br>New Filing Sectorision of Cor<br>P.O. Box 6327<br>Tallahassee, FL | tion<br>porations                                | AY 17 PM 12: 46 | RCTARY OF STATE |
| Enclosed i           | is a check for t   | he following amount:                         |   |  |                 |                 |
| <b>5</b> 70.00       | Filing Fee   | □ \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy   | \$87.50 Filing<br>Certificate of<br>Certified Co | f Statu         | ıs &            |

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

|   | WITH SECTION 607.1503, FLORIDA STATUTES, THE FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE  |  | ISTON OF                |
|---|---|--|-------------------------|
|   | wave Corp.  |  | F CO                    |
| (Enter name of co                           | orporation; must include "INCORPORATED," "COMPANY," "   | CORPORATION,"  | 2 3 9 C                 |
| "Inc.," "Co.," "Co                          | orp," "Inc," "Co," or "Corp.")  |  | 5 A2                    |
|   | 0.114   |  | 5                       |
| <u>Jelow</u>                                | ひと<br>ble in Florida, enter alternate corporate name adopted for the purp   | C  | <del>-</del>            |
| •   |   | •  | ida)                    |
| 2. <u>Nevado</u>                            | 13  | ) - 049088<br>I number, if applicable)                             | <del></del>             |
| 2. 1. 1                                     | 0   | ,  |                         |
| <b>~</b> , [~] '~ ] '                       | 5. Perpe  | · · · · · · · · · · · · · · · · · · ·                              |                         |
| (Date                                       | of incorporation) (Duration: Year co  | orp. will cease to exist or "perpetua                              | al")                    |
| 6   |   |  |                         |
| •   | (Date first transacted business in Florida, if prior to a (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine   |  |                         |
| 7. 256 N                                    | J. Orem Blvd Orem, UT 84097   |  |                         |
| /   | (Principal office address)  | · · · · · · · · · · · · · · · · · · ·                              |                         |
| 256 1                                       | 1. Ovem Blvd Ovem, UT 84097   |  |                         |
|   | (Current mailing address)   |  |                         |
| 8. To engage (Purpose(s)                    | n any lawful act or activity for which a corporation authorized in home state or country to be carried or   | OVATION MAY be OVGATIVE<br>out in state of Florida) Chapter        | ed under<br>· 78 of NRS |
| 9. Name and street                          | address of Florida registered agent: (P.O. Box NOT accep  | table)   |                         |
| Name:                                       | Krissa Allen  | •  |                         |
| Office Address:                             | 2035 Hollywood Blvd.  |  |                         |
|   | Hallymand   | 3 <i>3</i> 020   |                         |
|   | · · · · · · · · · · · · · · · · · · ·   | ip code)   |                         |
|   |   | , , , ,  |                         |
| designated in this (<br>further agree to co | ent's acceptance:<br>ed as registered agent and to accept service of process for the<br>application, I hereby accept the appointment as registered of<br>mply with the provisions of all statutes relative to the prope<br>with and accept the obligations of my position as registered | agent and agree to act in this co<br>er and complete performance o | apacity. I              |
|   | Krissa Wlee   |  |                         |
| <del></del>                                 | (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.

| 12. Names and business addresses of officers and/or directors:       | FRED  |
|--|---|
| A. DIRECTORS   | SECRETARY OF STATE<br>DIVISION OF CORPORATION |
| Chairman: Stephen L. Russo   | 2010 MAY 1.7 PM 12: 46                        |
| ddress: 530 S · 330 W ·  |   |
| <u>Orem, UT 84058</u>  |   |
| ice Chairman: James W. Childs  |   |
| ddress: 960 Vally View Dr.   |   |
| Santaquin, ut 84655  |   |
| irector: W. Andrew Ford  |   |
| ddress: 256 N. OREM BLVD.  |   |
| OREM, UT 84097   |   |
| irector:   |   |
| ddress:  |   |
|  |   |
| . OFFICERS   |   |
| resident: Stophen L. Russo   |   |
| r2 c 20 c  |   |
| Drem UT 840S8  |   |
| ice President: Jam's Childs  |   |
| ddress: 963 Valley View Dr.  |   |
| Sanfaguin, UT 34655  |   |
| cretary:   |   |
| ldress:  |   |
| easurer:   |   |
| ldress:  |   |
| adicss   |   |
| OTE: If necessary, you may attach an addendum to the application lis | sting additional officers and/or directors.   |
| 3 Jamesullil   |   |
| (Signature of Director or Officer listed in number                   |   |
| (Typed or printed name and capacity of person's                      | EXECUTIVE VP                                  |
| (Typed or printed name and capacity of person s                      | signing application)                          |

SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, VELOWAVE CORPORATION, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since October 13, 2009, and is in good standing in this state.

**Electronic Certificate** Certificate Number: C20100415-1907 You may verify this electronic certificate online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on April 15, 2010. .

> **ROSS MILLER** Secretary of State