

F14000000775

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

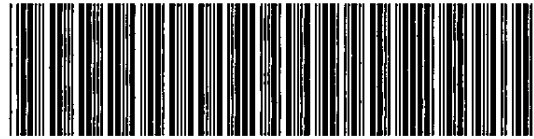
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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02/05/14--01019--001 \*\*70.00

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14 FEB 14 PM 12:59  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

11111-8625

ymd 2/20

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Bluewater Technologies, Inc

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" 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:

Beth Irvin

Name of Person

Bluewater Technologies, Inc

Firm/Company

1600 SE 15th Street Unit 314

Address

Fort Lauderdale, Florida 33316

City/State and Zip code

beth.irvin@bluewater-tech.net

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

For further information concerning this matter, please call:

Beth Irvin

Name of Person

at (401) 619-3650

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 10, 2014

BETH IRVIN  
1600 SE 15TH STREET, UNIT 314  
FORT LAUDERDALE, FL 33316

SUBJECT: BLUEWATER TECHNOLOGIES, INCORPORATED  
Ref. Number: W14000008625

We have received your document for BLUEWATER TECHNOLOGIES, INCORPORATED and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6052.

Maryanne Dickey  
Regulatory Specialist II

Letter Number: 614A00002985

**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

FILED  
14 FEB 19 PM 12:59  
STATE  
OFFICE  
TALLAHASSEE, FLORIDA

1. **Bluewater Technologies, Inc.,**

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

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. **Rhode Island**

(State or country under the law of which it is incorporated)

3. **45-4110114**

(FEI number, if applicable)

4. **January 1, 2012**

(Date of incorporation)

5. **"Perpetual"**

(Duration: Year corp. will cease to exist or "perpetual")

6. **January 27, 2014**

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. **1 Washington Street, Newport, Rhode Island 02840**

(Principal office address)

**1600 SE 15th Street Unit 314, Fort Lauderdale, Florida 33316**

(Current mailing address)

8. **Marine Electronics, Audio/Visual, Communications and Design Services**

(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: **Weston Ryder, III**

Office Address: **1132 NW 1st Avenue**

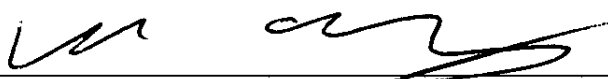
**Fort Lauderdale**, Florida **33311**

(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)

**2/18/14**

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:

**A. DIRECTORS**

Chairman: Scott Martinez  
Address: 1 Mill Street, Apt 3109  
Tiverton, RI 02878

Vice Chairman: Beth Irvin  
Address: 1 Mill Street, Apt 3109  
Tiverton, RI 02878

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: \_\_\_\_\_

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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

13. \_\_\_\_\_

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Beth Irvin - Vice Chairman, Operations Manager

(Typed or printed name and capacity of person signing application)

14 FEB 19 PM 12:59  
STATE  
SECRETARY  
ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED  
DATE 11/11/01 BY 1043



# State of Rhode Island and Providence Plantations

A: Ralph Mollis

Secretary of State



14 FEB 19 PM 12:59  
STATE  
RECEIVED  
PROVIDENCE, RI 02904

Certification Number: **14010057930**

The office of the Secretary of State of the State of Rhode Island and Providence Plantations,  
HEREBY CERTIFIES, that

## BLUEWATER TECHNOLOGIES, INC.

a Rhode Island corporation, filed original articles of incorporation in this office on

December 22, 2011

Effective

January 01, 2012

IT IS FURTHER CERTIFIED that as of this date said corporation is duly organized and existing  
under and by virtue of the laws of the State of Rhode Island and is in good standing according  
to the records of this office.

SIGNED AND SEALED ON

Thursday, January 30, 2014

Secretary of State

Authorized Agent

