BEECHER LEWIS  Requester's Name		
119 WAVERLY RD	1-2628	
City/State/Zip Phone #  Corporation Name(s) & DOCUM	00306	Vn):
1. BLUE WATER IMAGING, LTD. (Corporation Name)	(Document #)	OZ FEB
2(Corporation Name)	(Document #)	FAMILED AND:
3(Corporation Name)	(Document #)	ORDA ORDA F
4(Corporation Name)	(Document #)	,
Walk in Pick up time		Certified Copy
Mail out Will wait	13	Certificate of Status
NEW FILINGS  Profit Not for Profit Elimited Liability Domestication Other	AMENDMENTS  Amendment Resignation of R.A., C Change of Registered A Dissolution/Withdrawa Merger	Agent
OTHER FILINGS  Annual Report  Fictitious Name	REGISTRATION/QUAL  Foreign Limited Partnership Reinstatement Trademark Other	<u>IFICATION</u>
CR2E031(7/97)	<u>I</u>	Examiner's Initials

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## **ARTICLE I - Name:**

The name of the Limited Liability Company is:

BLUE WATER IMAGING, LID, CO.

ARTICLE II - Address: 919 WAVERLY RD, THE MAILING ADDRESS and street address of the principal office of the Limited Liability Company is:

## ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

BEECHER LEWIS
919 WAVERLY RD
Florida street address (P.O. Box NOT acceptable)
City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature

therefore, a manager - managed company.  An additional article must be added if an effective date is requested)
LLAHAS HASTA
ASE -
ASE -
ASE -
(An additional article must be added if an affective data in the second of the second
ings to adjust if all effective date is requested)
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Typed or printed name of signee

## Filing Fees:

\$100.00 Filing Fee for Articles of Organization

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\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)