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Certified Copies	Certificates	of Status
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SECRETARY OF STATE
SECRETARY OF STATE
AND ANASSEE, FLORIDA.

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Blue watter Executive Capital, LLC (Name of Limited Liability Company)
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following:
BRAX+ON F TONES (Name of Person)
· · · · · · · · · · · · · · · · · · ·
(Firm/Company)
4456 18/155 RD (Address)
SANASSTA FL 34233 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) Tokes at (941) 3236644 (Area Code & Daytime Telephone Number)
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\Begin{align*} \Pi \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREI LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. T3/yearton Executive Capital LAC
· (Name of Foreign Limited Liability Company)
2. Company 1 1 2 2 2 2 3 2 2 2 3 2 2 2 3 2 2 2 2 2
company is organized)
4. 29 August 2006 5. Pervetual (Date of Organization) (Duration: Year limited liability company will cease to
exist or "perpetual")
6.
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
1. 7456 73/135 RD FEE &
SMAN SOTA FX 34233 PE 25
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows
- FITTE STEP
BRAXTON TONES
4456 TSliss RD SARASOTA FL 34233
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translation must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: /westnew #
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., 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
•

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is: 13/uewaten Executive Capital,	LLC
2. The name and the Florida street address of the registered agent and office are:	
BRAXTON TONES	06 OCT 25 SECRETAIN TALLAHASS
Florida Street Address (P.O. Box NOT ACCEPTABLE)	PM 12:
SAMPSOTA FL 34233 City/State/Zip	34 NDA

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, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application
 \$ 25.00 Designation of Registered Agent
 \$ 30.00 Certified Copy (optional)
 \$ 5.00 Certificate of Status (optional)

State of Wyoming

Office of the Secretary of State



United States of America, State of Wyoming

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I, JOSEPH B. MEYER, Secretary of State of the State of Wyoming, do hereby certify that the filing requirements for the issuance of this certificate have been fulfilled.

CERTIFICATE OF ORGANIZATION

OF ... BLUEWATER EXECUTIVE CAPITAL, LLC ...

Accordingly, the undersigned, by virtue of the authority vested in me by law, hereby issues this Certificate.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Wyoming. Done at Cheyenne, the Capital, this 29th day of August A.D., 2006.



Secretary of State

By Golanda m. Polen