

M12000003739

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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

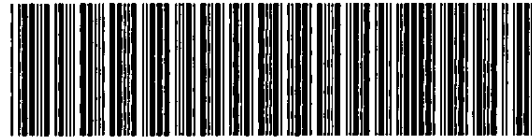
Special Instructions to Filing Officer:

Office Use Only

B. KOHR

JUL - 3 2012

EXAMINER



900235851529

06/18/12--01028--007 \*\*125.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 JUN 25 PM 12:39



RECEIVED JUN 25 2012

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 19, 2012

CHRISTINE CONGER  
WAVETRONIX LLC  
78 EAST 1700 SOUTH, BLDG. B  
PROVO, UT 84606

SUBJECT: WAVETRONIX LLC  
Ref. Number: W12000033179

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 JUN 25 PM 2:39

We have received your document for WAVETRONIX LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a foreign limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations. Therefore, the limited liability company must select an alternate name for use in the state of Florida. Also, please note that adding "of Florida" or "Florida" to the end of the name is not acceptable.

Please insert the alternate name in the space provided on the application form. You must also attach a copy of the written consent of the managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

The alternate name must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC".

The existing entity with a similar name is WAVETRONIX, INC. -- Document Number H11551.

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) 245-6051.

Buck Kohr  
Regulatory Specialist II

Letter Number: 312A00017044

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 JUN 25 PM 12:39

COVER LETTER

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 JUN 25 PM 12:39

TO: Registration Section  
Division of Corporations

SUBJECT: Wavetronix 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:

Christine Conger  
Name of Person

Wavetronix LLC  
Firm/Company

78 East 1700 South, Bldg B  
Address

Provo, Utah 84606  
City/State and Zip Code

Christine. Conger@wavetronix.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christine Conger at (801) 734-7204  
Name of Person Area Code & Daytime Telephone Number

**MAILING ADDRESS:**  
Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**  
Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 JUNE 15 PM 12:39

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN  
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. Waveformix LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Waveformix UTAH LLC

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")

2. IDAHO 3. 82-0525153  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. August 2000 5. NA  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. June 2012  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 78 East 1700 South, Bldg B, Provo, Utah 84606  
(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:

David Arnold 78 E 1700 S. Bldg B, Provo, Utah 84606  
Brian Hagen " " "  
Mike Jensen " " "

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in 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 translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: Sales

[Signature]  
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. I am aware that any 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.)

Brian J. Hagen  
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:

Wave tronix LLC

If unavailable, the alternate to be used in the state of Florida is:

Wave tronix UTAH LLC

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

**CHRISTINE CONGER**

Wave tronix LLC

(Name)

455 Douglas Avenue - Suite 1855

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Altamonte Springs FL 32714

City/State/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, Florida Statutes.*

Christine Conger

(Signature)

**\$ 100.00**

**Filing Fee for Application**

**\$ 25.00**

**Designation of Registered Agent**

**\$ 30.00**

**Certified Copy (optional)**

**\$ 5.00**

**Certificate of Status (optional)**

**WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE  
STATE OF FLORIDA**

We, the undersigned, do hereby certify that we are the Managers and/or Managing

Members of Waveformix LLC  
(Name of Limited Liability Company)

a limited liability company duly organized and existing under the laws of

Idaho  
(State or Country of Organization)

Because the name of this foreign limited liability company does not satisfy the  
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the  
following name to transact business in the state of Florida:

→ Waveformix UTAH LLC  
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability  
Company, L.L.C., or LLC.)

Date: 6-25-2012

Signature(s) of Manager(s) and/or Managing Member(s):

[Signature] \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# State of Idaho

Office of the Secretary of State

## CERTIFICATE OF EXISTENCE

OF

WAVETRONIX LLC

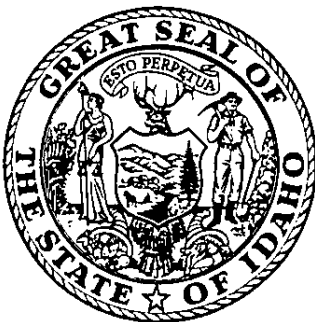
File Number W 12607

I, BEN YSURSA, Secretary of State of the State of Idaho, hereby certify that I am the custodian of the limited liability company records of this State.

I FURTHER CERTIFY That the records of this office show that the above-named limited liability company filed articles of organization in Idaho on 7 August 2000.

I FURTHER CERTIFY That the limited liability company has not been dissolved.

Dated: June 6, 2012



*Ben Yursa*

SECRETARY OF STATE

By

*Sheryl LeVine*