

P03000035949

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

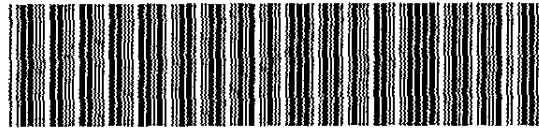
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



00001127880

02/06/03--01015--012 **78.75

2003 FEB 13 10 11 AM '03

1000

W03-4205

U3-3103

TS

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Blue Wave Manufacturing Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate of Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Vickie Corbitt
Name (Printed or typed)

P O Box 1135
Address

Orange Park, FL 32067
City, State & Zip

(904) 384-3102
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Ken Detzner
Secretary of State

February 12, 2003

VICKIE CORBITT
PO BOX 1135
ORANGE PARK, FL 32067

SUBJECT: BLUE WAVE MANUFACTURING INC.
Ref. Number: W03000004205

We have received your document for BLUE WAVE MANUFACTURING INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must have a Florida street address. A post office box, personal mail box (PMB), or mail drop-box address is not acceptable.

Please return the original and one copy of 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) 245-6928.

Tim Burch
Document Specialist
New Filing Section

Letter Number: 703A00009454

ARTICLES OF INCORPORATION

In compliance with Chapter 697 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Blue Wave Manufacturing Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

P.O. BOX 1135
ORANGE PARK, FL 32067

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

NEW BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100 shares

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Vickie Corbitt
P.O. Box 1135
Orange Park, FL 32067

ARTICLE VI REGISTERED AGENT

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

Vickie Corbitt
4751 San Juan Ave Ste 10
Jax, FL 32210

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Vickie Corbitt
4751 San Juan Ave Ste 10
Jax, FL 32210

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

X Vickie Corbitt
Signature/Registered Agent

Jan 1, 2003
Date

Y Vickie Corbitt
Signature/Incorporator

Jan 1, 2003
Date

RECORDED
2003 JAN 26 PM 3:17
STATE OF FLORIDA
CLERK OF THE CIRCUIT COURT
IN AND FOR THE COUNTY OF DUNEDIN