

PID000009692

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

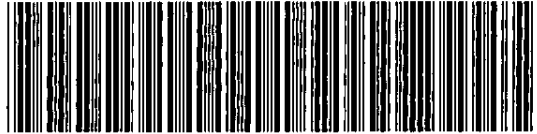
(Business Entity Name)

(Document Number)

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

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2010 FEB -1 P 1:54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FEB -2 2010  
D.A. WHITE

## COVER LETTER

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

SUBJECT: Bluewater Insurance Agency, 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: Guillermo Vela  
Name (Printed or typed)

10691 SW 88 St. #204  
Address

Miami, FL 33176  
City, State & Zip

(305) 598 3445  
Daytime Telephone number

gil@blueh2ofunding.com  
E-mail address: (to be used for future annual report notification)

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

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

Bluewater Insurance Agency, Inc.

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TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

10691 SW 88 St #201  
Miami, FL 33176

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Insurance Broker Agency A  
Professional Corporation

**ARTICLE IV SHARES**

The number of shares of stock is:

100 shares

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Guillermo Vela - President

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Mary Beirne Vela  
10203 SW 67 Ave  
Miami, FL 33156

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Guillermo Vela  
10203 SW 67 Ave  
Miami, FL 33156

\*\*\*\*\*

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

Signature/Registered Agent

Signature/Incorporator

Jan 27, 2010  
Date

Jan 27 - 2010  
Date