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# **COVER LETTER**

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

SUBJECT:		Global Ventures, Inc.	
	(PROPOSED CORPORA	TE NAMÉ – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles 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 CO	PY REQUIRED
FROM:	Sano	ra C. Larson	
		e (Printed or typed)	
	21751 N	IE Highway 27	
		Address	
	Willist	on, FL 32696	
-		State & Zip	
		-528-5587	
	Daytime T	elephone number	
		rso@aol.com	
	E-mail address: (to be use	d for future annual report n	otification)

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

A	R	TI	CI	ES	OF	<b>INCORPORAT</b>	LION
				44-1	<b>1/1</b>		

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

#### ARTICLE I NAME

The name of the corporation shall be:

Blue Wave Global Ventures, Inc.

#### ARTICLE II PRINCIPAL OFFICE

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

21751 NE Highway 27 Williston, FL 32696

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of the corporation is to conduct any lawful purpose or purposes.

## ARTICLE IV SHARES

The number of shares of stock is:

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Sandra C. Larson President 21751 NE Highway 27 Williston, FL 32696

#### ARTICLE VI REGISTERED AGENT

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

Sandra C. Larson 21751 NE Highway 27 Williston, FL 32696

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Sandra C. Larson 21751 NE Highway 27 Williston, FL 32696

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

Signature/Incorporator

11-5-2010

11-5-2010

Date

SECRETARY OF STATE
SIVISION OF CORPERATIONS