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COVER LETTER

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

UBJECT: BRA	INWAVE TECHNO (PROPOSED CORPOR	OLOGIES, INC.	UDE SUFFIX)
nclosed are an orig	ginal and one (1) copy of the a	articles of incorporation and	d 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:	USAN SPICER, PH Nai 234 BALLYSHANN	me (Printed or typed)	
		Address	
0	RLANDO, FL. 328	328	
	Cit	y, State & Zip	- 14
98	39-233-1333		美
	Daytime	Telephone number	
su	ısie.spicer@gmail.	com 🗸	141 130
	E-mail address: (to be u	sed 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)

The name of the corpora	tion shall be: BRAINWAVE TECH	HNOLOGIES, INC.	
ARTICLE II PRI	NCIPAL OFFICE Principal <u>street</u> address	Mailing ad	dress, if different is:
SUSAN SPICE	R, PHD		
1234 BALLYS	HANNON PARKWAY		
ORLANDO, FL	. 32828		
The purpose for which t	POSE he corporation is organized is: Brainwav enhancing well-being through cutting		founded with the vision of ted to brainwave patterns.
To realize this vision	on, we have married the latest adv	ancements in brainway	e research with soothing
music, imagery, an	d clinical hypnotherapy to produce	audio medium specific	ally designed to address
numerous clinical	issues such as depression, anxie	ety, and insomnia, as w	vell as facilitate healing,
creativity, and lear	ning. Our mission is to utilize our	unique approach to bra	in optimization to impact
as many individua	ils as possible, and become the	world's largest produc	er of brainwave music.
ARTICLE V INTO Name and Title Address	SUSAN SPICER, PRESIDENT AND CEC 1234 BALLYSHANNON PARKWAY ORLANDO, FL. 32828		
Name and Title: Address			13 JUL 24 PH 1
Name and Title:			LORUGA

Name a	nd Title:	Name and Title:
Addres	s	Address:
ARTICLE VI The name and I Name: Address:	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable) of SUSAN SPICER, PHD 1234 BALLYSHANNON PARKWAY ORLANDO, FL. 32828	the registered agent is:
ARTICLE VII		
The name and a	address of the Incorporator is:	
Name:	SUSAN SPICER, PHD	
Address:	1234 BALLYSHANNON PARKWAY	
rauros.	ORLANDO, FL. 32828	
Having been na this certificate, I	am familiar with and accept the appointment as reg	for the above stated corporation at the place designated in istered agent and agree to act in this capacity 7-20-2013
I submit this do	Required Signature/Registered Agent ocument and affirm that the facts stated herein are Department of State constitutes a third degree felon	Date true. I am aware that the false information submitted in a provided for in s.817.155, F.S.
	Sun Specie	7-20-2013
	Required Signature/Incorporator	Date 24 PM 4: 12