# P14000045547

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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04/24/14--01023--002 \*\*113.75

DIVISION OF CORRESPONDED

Itt

#### **COVER LETTER**

TO: Charter Section Division of C			
Rhi	e Wave Imag	ina. Inc.	
SUBJECT: DIG		ng Florida Profit Corporation	n
		•	, and fees are submitted to tion" in accordance with s.
Please return all corre	espondence concernin	g this matter to:	
Joshua Yent	tis		
	Contact Person	-	
Blue Wave I	maging		
	Firm/Company		
10010 Cryst	alline Ct		
	Address		
Orlando FL	32836		
C	ity, State and Zip Code		
ioshua@blue	ewaveimagin	g.com	
	be used for future annual r		
For further information	on concerning this ma	tter, please call:	
Joshua Yent	tis	_at ( 954 ) 72	27-5757
Name of Con	tact Person	Area Code and Dayti	me Telephone Number
Enclosed is a check f	or the following amou	ınt:	
□ \$105.00 Filing Fees	\$113.75 Filing Fees and Certificate of Status	□\$113.75 Filing Fees and Certified Copy	□\$122.50 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS New Filings Section Division of Corporate Clifton Building 2661 Executive Cent Tallahassee, FL 323	ions er Circle	MAILING A New Filings S Division of C P. O. Box 63 Tallahassee, N	Section Corporations 27



April 25, 2014

JOSHUA YENTIS 10010 CRYSTALLINE CT ORLANDO, FL 32836

SUBJECT: BLUE WAVE IMAGING LLC

Ref. Number: W14000026372

We have received your document for BLUE WAVE IMAGING LLC and your check(s) totaling \$113.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return the corrected 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) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 714A00008919

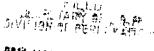
## **Certificate of Conversion**

For

# "Other Business Entity"

Into

## Florida Profit Corporation



智用 HAY 22 PM 3: 32

This Certificate of Conversion <u>and attached Articles of Incorporation</u> are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:
Blue Wave Imaging LLC L12000039756
Enter Name of Other Business Entity
2. The "Other Business Entity" is a LLC  (Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of Florida
(Enter state, or if a non-U.S. entity, the name of the country)
3/21/12
Inter date "Other Business Entity" was first organized, formed or incorporated  3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:
4. The name of the Florida Profit Corporation as set forth in the <b>attached Articles of Incorporation:</b>
Blue Wave Imaging, Inc.
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date:  (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)

4		٨		
Signed this <u>2</u>	$\frac{2}{2}$ day of	APRIL	, 20	SIVISION OF TEATURE
Peguired Sign	oture for Flor	ida Profit Corporat	ion:	
Required Sign	iture ior Pior	ida 110iii Corporat	<u>ion.</u>	284 MAY 22 PM 3: 32
Signature of Ch	airman, Vice ( n Incorporator	Chairman, Director, C	Officer, or, if Directors	s or Officers have not
Printed Name:	JOSHUA	YEAT. Title:	MERM	
	ture(s) on beh	alf of Other Busines	s Entity: [See below for	or required
signature(s).]				
a				
Signature:	7.5	V = 15.0	_Title: M 6 RM	<del> </del>
Printed Name:	MC MCOL	75~1.13	_ Title: / 10/2/01	<del> </del>
Signature:				
Printed Name:			Title:	
Signature:	<del></del>	<del> </del>	Title:	
Printed Name:_	<del> </del>		Title:	
Cianatura				
Printed Name			Title:	
Timed Name				<del></del>
Signature:				
Printed Name:			Title:	
Signature:			Title:	
Printed Name:			I tite:	<del> </del>
		p or Limited Liabili	ty Partnership:	
Signature of one	General Partne	er.		
<u>If Florida Limi</u>	ted Partnershi	p or Limited Liabili	y Limited Partnershi	<u>p:</u>
Signatures of Al	<u>L</u> General Par	tners.		
rem		·		
If Florida Limi		ompany: orized Representative		
Signature of a iv	childer of Auth	orized Representative	•	
All others: Signature of an a	uthorized perse	on.		
Fees:				
	te of Conversi	on:	\$35.00	
		es of Incorporation:	\$70.00	
Certified		<b>r</b>	\$8.75 (Optional)	
	ite of Status:		\$8.75 (Optional)	

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

ARTICLE I NAME	WALE IMAGING, 21/2MICES PM 3: 32
The name of the corporation shall be:	WALE IMAGING, THICK PH 3: 32
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
Principal street address	Mailing address, if different is:
10010 CEYSTALLINEC	
08-LANDO FL 32836	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
PROFESSIONAL PHOTO	GRAPHY SERVICE
	1
ARTICLE IV SHARES /	
The number of shares of stock is: /000	<del></del>
ARTICLE V INITIAL OFFICERS AND/OR	DIRECTORS
Nome and Title: Tos (24 1/2) C Mb	240 Name and Title
Name and Thie. SOSASA YELLTY	PM Name and Title:  Address:
Address: 100/0 CeySTALLIME	C7 Address:
ORLANDO FL 3283	<u> </u>
Name and Title:	Name and Title:
Address:	Address:
Name and Title:	Name and Title:
Address:	Address:
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT)	acceptable) of the registered agent is:
C C	
Name: SOSMJA YENTI	
Address: 100/0 CRYSTALLINE	T CT
Name: SOSHJA VENTIS Address: 10010 CRYSTALLINE ORLANDO FL 3283	6

ARTICL		rimble
The <u>name</u>	and address of the Incorporator is:	TOTAL TARRY OF THE ATTENTION OF THE ATTENTION OF PORT OF THE
Name:	JOSHJA YENTIS 100/0 CRISTALLINE CT.	2814 MAY 22 PM 3: 32
Address:	100/0 CRISTALLINE CT.	2814 MAT 22 TTT 3- 02
	ORLANDO FL 32836	
******	***********	******
	een named as registered agent to accept service of pro I in this certificate, I am familiar with and accept the app	
-		4/22/2014
	Required Signature/Registered Agent	Date
I submit t	this document and affirm that the facts stated herein in a document to the Department of State constitutes a th	are true. I am aware that any false information hird degree felony as provided for in s.817.155, F.S.
		4/22/2014
	Required Signature/Incorporator	Date