

BRODIE & PAWLUC
C O U N S E L L O R S A T L A W
LAWRENCE P. BRODIE GONIA M. PAWLUC

March 31, 1995
P95000027069

Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

RE: Articles of Incorporation
BLUE WATER GRAPHICS, INC.

600001446936
-04/04/95--01042--009
****122.50 ****122.50

Dear Sir or Madam:

Enclosed please find an original and one copy of the Articles of Incorporation of the above corporation and a check in the amount of \$122.50 (\$35.00-filing fee, \$35-Registered Agent Designation, and \$52.50-certified copy). Upon filing, please return a certified copy of the Articles.

From: Brodie & Pawluc
Post Office Box 2690
Stuart, FL 34995
Telephone: (407) 221-0110

Thank you in advance for your attention to this matter.

Very truly yours,

Lawrence P. Brodie

Lawrence P. Brodie

rlb
Enclosures

BMC 4/5/95

FILED
95 APR -3 PM 2:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
BLUE WATER GRAPHICS, INC.

FILED

95 APR -3 PM 2:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of this Corporation is BLUE WATER GRAPHICS, INC. (the "Corporation").
2. The street address of the initial principal office of the Corporation is 270 S. W. 42nd Avenue, Palm City, Florida 34990. The mailing address is Post Office Box 717, Stuart, Florida 34995.
3. The Corporation shall have the authority to issue 100,000 shares of Common Stock, par value \$.01 per share.
4. The name and street address of the initial registered agent of the Corporation is Lawrence P. Brodie, 819 South Federal Highway, Suite 106, Stuart, FL 34994.
5. The name and address of the incorporator is Lawrence P. Brodie, 819 South Federal Highway, Suite 106, Stuart, FL 34994.

Dated: March 31, 1995.

Lawrence P. Brodie

Lawrence P. Brodie, Incorporator

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

FILED

95 APR -3 PM 2:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OF THE FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is BLUE WATER GRAPHICS, INC.
2. The name and address of the registered agent and office is:

Lawrence P. Brodie
819 South Federal Highway, Suite 106
Stuart, FL 34994

Having been named as registered agent and to accept service of process for the above-stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Dated: March 31, 1995


Lawrence P. Brodie, Registered Agent

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Morlham
Secretary of State
DIVISION OF CORPORATIONS

FILED

96 DEC 13 PM 2:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PA5000007069

1. Corporation Name
BLUE WATER GRAPHICS, INC.
7977 SW JACK JAMES DRIVE
STUART, FL. 34997

Principal Place of Business
7977 SW JACK JAMES DRIVE
STUART, FL. 34997

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable		3. New Mailing Address, if Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

REINSTATEMENT 96

DO NOT WRITE IN THIS SPACE

4. Date Incorporated or Qualified To Do Business in Florida APRIL 3, 1995	
5. FET Number 45-0576224	Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/>	

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
P/T	DONALD N. MADER	1605 US 1 2102	JUPITER, FL. 33477
V/M	ERIC SISITSKY	13091 N. 49th ST	ROYAL PALM, FL 33411
S	ROBERT M REGER	3270 SW 42nd AVE	PALEM CITY, FL. 34990

300002030669--3
12/17/96 01875 088
***383.75 ***383.75

JB12-13-96

8. Name and Address of Current Registered Agent

L. P. BROJIE
819 S. FEDERAL HWY
STUART, FL. 34994

9. Name and Address of New Registered Agent

Name ERIC SISITSKY		
Street Address (P.O. Box Number is Not Acceptable) 13091 N. 49th ST		
Suite, Apt. #, Etc.		
City ROYAL PALM	State FL	Zip Code 33411

I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent Eric Sisitsky

REGISTERED AGENT MUST SIGN

Date **12-11-96**

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐

(See other side for information on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Donald N. Mader **DONALD N. MADER**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **12-11-96**

561-286-2249
Daytime Phone #