oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHARLES L LEWIS III

Electronic Signature of Signing Authorized Person(s) Detail

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000362150

Entity Name: BLUEWAVE INVESTMENT PARTNERS DESKPASS 2 LLC

Current Principal Place of Business:

250 NORTH ORANGE AVE SUITE 900 ORLANDO, FL 32801

Current Mailing Address:

250 NORTH ORANGE AVE SUITE 900 ORLANDO, FL 32801 US

FEI Number: 86-2097893

Name and Address of Current Registered Agent:

LEWIS, CHARLES L III 250 NORTH ORANGE AVE SUITE 900 ORLANDO, FL 32801 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title	MGR	Title	MANAGER
Name	LEWIS, CHARLES L III	Name	OWEN, DUSTIN
Address	250 NORTH ORANGE AVE, SUITE 900	Address	1610 WRENTHAM COURT
City-State-Zip:	ORLANDO FL 32801	City-State-Zip:	WINTER SPRINGS FL 32708

Date

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under

MGR

FILED Feb 13, 2024 Secretary of State 0781615128CC

Certificate of Status Desired: No

02/13/2024 Date