

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

**FILED**  
**Oct 11, 2007**  
**Secretary of State**

DOCUMENT# L03000008718

**Entity Name:** WAVE VENTURES, LLC

**Current Principal Place of Business:**

225 HILLCREST DRIVE NORTH  
CLEARWATER, FL 33755

**New Principal Place of Business:**

225 HILLCREST DRIVE NORTH  
CLEARWATER, FL 33755 50

**Current Mailing Address:**

225 HILLCREST DRIVE NORTH  
CLEARWATER, FL 33755

**New Mailing Address:**

225 HILLCREST DRIVE NORTH  
CLEARWATER, FL 33755 50

FEI Number: 54-2095552

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MURRAY, DEBRA KAGAN  
225 HILLCREST NORTH  
CLEARWATER, FL 33755 US

**Name and Address of New Registered Agent:**

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: DEBRA KAGAN MURRAY

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MURRAY, PATRICK M  
Address: 225 HILLCREST DRIVE NORTH  
City-St-Zip: CLEARWATER, FL 33755

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under 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 608, Florida Statutes.

SIGNATURE: PATRICK M MURRAY

MRG

10/11/2007

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Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date