

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000012526

Entity Name: MAKING WAVES, L.L.C.

FILED  
Feb 08, 2007  
Secretary of State

## Current Principal Place of Business:

10940 EMERALD CHASE DR  
ORLANDO, FL 32836

## New Principal Place of Business:

401 S PALM AVE  
802  
SARASOTA, FL 34236

## Current Mailing Address:

10940 EMERALD CHASE DR  
ORLANDO, FL 32836

## New Mailing Address:

PO BOX 49165  
SARASOTA, FL 34236

FEI Number: 20-0731994      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

SKOKOS, PETER Z  
1819 MAIN ST, STE 610  
SARASOTA, FL 34236      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: PETER Z SKOKOS

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: RIVERA, RICHARD E  
Address: 10940 EMERALD CHASE DRIVE  
City-St-Zip: ORLANDO, FL 32836 US

Title: MGR ( ) Delete  
Name: RIVERA, LESLIE S  
Address: 10940 EMERALD CHASE DRIVE  
City-St-Zip: ORLANDO, FL 32836 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: RIVERA, RICHARD E  
Address: 401 S PALM AVE, #802  
City-St-Zip: SARASOTA, FL 34236 US

Title: MGR (X) Change ( ) Addition  
Name: RIVERA, LESLIE S  
Address: 401 S PALM AVE, #802  
City-St-Zip: SARASOTA, FL 34236 US

I hereby certify that the information supplied with this filing does not qualify for the 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: LESLIE S RIVERA

MGRM

02/08/2007

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