L1000094851

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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NECCEIVED

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B. KOHR

SEP 1 0 2010

EXAMINER



ACCOUNT NO. : I2000000195

REFERENCE: 498809

7731572

AUTHORIZATION :

COST LIMIT

ORDER TIME : 2:44 PM

ORDER DATE: September 2, 2010

ORDER NO. : 498809-010

CUSTOMER NO: 7731572

DOMESTIC AMENDMENT FILING

NAME: WAVE PATTERN, INC.

EFFECTIVE DATE:

XX ___ CERTIFICATE OF CONVERSION/ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd -- EXT# 2940

EXAMINER'S INITIALS:





September 7, 2010

TROY TODD CSC TALLAHASSEE, FL

SUBJECT: WAVE PATTERN, LLC Ref. Number: W10000041821

Please give original submission date as file date.

We have received your document for WAVE PATTERN, LLC and the authorization to debit your account in the amount of \$160.00. However, the document has not been filed and is being returned for the following:

The wrong conversion certificate has been used.

To convert a Florida corporation into a Florida LLC, you must use the OTHER BUSINESS ENTITY INTO FLORIDA LLC certificate of conversion.

Please note that this document requires the signatures of both the CONVERTING ENTITY and the RESULTING ENTITY.

Please return 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) 245-6914.

Buck Kohr Regulatory Specialist II

Letter Number: 910A00021218

NOT WITCHDED

TO ACKNOWLEDGE
SUFFICIENCY OF FILING

MECEIVED
DEPARIMENT OF STATE
MOIVISION OF CORPORATIONS

Certificate of Conversion For "Other Business Entity" Into Florida Limited Liability Company

This Certificate of Conversion and attached Articles of Organization are submitted to



convert the following "Other Business Entity" into a Florida Limited Liability 804VWW 85638 Company in accordance with s.608.439, Florida Statutes. 1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is: WAVE PATTERN, INC. (Enter Name of Other Business Entity) 2. The "Other Business Entity" is a corporation (Enter entity type. Example: corporation, 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) on 10/16/2009 (Enter 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 Limited Liability Company as set forth in the attached Articles of Organization; WAVE PATTERN, LLC (Enter Name of Florida Limited Liability Company) 5. If not effective on the date of filing, enter the effective date: upon filing (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 Organization, if an effective date is listed therein.)

Signed this 8 day of September	20_10			
Signature of Member or Authorized Representative of Limited Liability Company:				
Signature of Member or Authorized Representative Printed Name: Matthew McLoughlin	: /s/ Matthew McLoughlin Title: Member			
Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]				
Signature: /s/ Matthew McLoughlin Printed Name: Matthew McLoughlin	Title: CEO			
Signature:Printed Name:	Title:			
Signature:Printed Name:				
Signature: Printed Name:	_Title:			
Signature:Printed Name:	_Title:			
Signature:				
Printed Name:	_Title:			
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.				
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.				
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.				
All others: Signature of an authorized person.				
Fees:				
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	1 15 15 15 15 15 15 15 15 15 15 15 15 15
WAVE PATTERN, LLC	ity Company, "L.L.C.," or "LLC.")
(Must end with the words "Limited Liabili	يخ در (Ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1019 Crescent Street	1019 Crescent Street
Sarasota, FL 34242	Sarasota, FL 34242
(The Limited Liability Company cannot serve as its own Registration.) The name and the Florida street address of the recommendation. Corporation Service Corporation	egistered agent are:
Name	
1201 Hays Street	
Florida street address (P.O. Box NOT acceptable)	
Tallahassee	FL 32301
City, State, a	nd Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as regis	accept service of process for the above stated limited his certificate, I hereby accept the appointment as a I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S
Corporation Service C	Many Troy Todd

Corporation Service Corporary

BY:

Registered Agent's Signature (REQUIRED)

Troy Todd
as its agent

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Membe	Name and Address:
MGRM	Matthew H. McLoughlin P.O. Box 2798 Sarasota, FL. 34230
(Use attachment if necessary)	
ARTICLE V: Effective date, if other the (If an effective date is listed, the date is or 90 days after the date of filing.)	nan the date of filing: (OPTIONAL) must be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
/s/Matthew N	McLoughlin

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Matthew McLoughlin, Authorized Representative

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)