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### FLORIDA LIMITED LIABILITY CO. Sun Wave LLC

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#### ARTICLES OF ORGANIZATION OF Sun Wave LLC

ARTICLE I

NAME

The name of the limited liability company shall be: Sun Wave LLC

**ARTICLE II** 

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 1762 72nd Ave. NE, Saint Petersburg, Florida 33702.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Niece Jochims, 1762 72nd Ave. NE, Sain Petersburg, Florida 33702. Located in the County of Pinellas.

ARTICLE IV

DURATION

The duration for the limited liability company shall be: Perpetual.

ARTICLE V

MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are: Niece Jochims, 1762 72nd Ave. NE, Saint Petersburg, Florida 33702

Mary Jo Henderson, 118 15th St, Belleair Beach, Florida 33786

Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison,

Date: September 20, 2010 -

WI 53717 608-827-5300

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## FAX AUDIT # H10000209765 3

#### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, 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.

The name of the limited liability company is: Sun Wave LLC

The name and address of the registered agent and office is Niece Jochims, 1762 72nd Ave. NE, Saint Petersburg, Florida 33702. Located in the County of Pinellas.

Having been named as registered agent and to accept service of process for the above stated company 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.

Signature: Nucl Jochims
Niece Jochims

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