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J. SAULSBERRY EXAMINER JUL 19 2012

COVER LETTER

TO: Registration Division of	n' Section Corporations	
CUDIECT.	OUR WAVE, LLC	
SUBJECT:	Name of Limited Liability Company	
	s of Amendment and fee(s) are submitted for filing. espondence concerning this matter to the following:	· ·
	Randy J. Nathan, Esq	
	Frnak, Weinberg & Black, P. L. Firm/Company	
	тини сопрану	201 TAL
	7805 SW 6th Court	- 2 JL
	Address	2012 JUL 13 PM 12: 21 SECRETARY OF STATE ALLAHASSEE, FLORIO
	Plantation, FL 33324	SHOW TO
	City/State and Zip Code	E.S. PH.
	rnathan@fwblaw.net E-mail address: (to be used for future annual report notification)	DRIG
For further information	on concerning this matter, please call:	Þ
Nai	Pat Hart at (954) 474-8000 x 144 me of Person Area Code & Daytime Telephone Number	r
	for the following amount:	
\$25.00 Filing Fee	Certificate of Status Certified Copy Certificate (additional copy is enclosed) Certified	ate of Status &
Re Div P.C	AILING ADDRESS: gistration Section vision of Corporations Division of Corporations Division of Corporations Clifton Building llahassee, FL 32314 STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	OUR WAVE, LLC		
(Name of the Limited (A	Liability Company as it now appe Florida Limited Liability Company	ars on our records.)	. • •
The Articles of Organization for this Limited Lia	ability Company were filed on	March 23, 2011	and assigned
Florida document numberL11000033	382		
This amendment is submitted to amend the follo	wing:		•
A. If amending name, enter the new name of	the limited liability company h	ere:	
The new name must be distinguishable and end with "L.L.C."	h the words "Limited Liability Com	pany," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applica	able:		28 Z
(Principal office address MUST BE A STREE	T ADDRESS)		COR 2
			ASSE IS
Enter new mailing address, if applicable:			TO R CO
(Mailing address MAY BE A POST OFFICE BOX)			
			> 2
	() D		•
B. If amending the registered agent and/or registered agent and/or the new registered of		our records, enter t	ie name of the new
Name of New Registered Agent:			
New Registered Office Address:			
,		Enter Florida street addi	ess
		, Florida	
	City		Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

<u>Title</u>		Name	<u>Address</u>	Type of Action
	· •			Add Remove
	-			Add Remove
	-			Add Remove
	-			Add Remove
				Add Remove
	-	<u> </u>		AddRemove
D. If an	nending	g any other information, enter change	e(s) here: (Attach additional sheets, if necessa	ry.)
		se amend Principal Address to 5 3. Also add FEI/EIN Number 90-	614 NW 16th Street, #12, Lauderhill, 0673645	2012 JUL SECRETA ALLAHAS
Dated		July 13, 20	11	PM 12:24
		\ i\Q \	(
_	_	Signature of a member	or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00