## L11000 111935

| (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



200441600242

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

| ACCOUNT NO. :  | 12000000195     |  |  |  |  |
|--|-----------------|--|--|--|--|
| REFERENCE :  | 8661157 4321040 |  |  |  |  |
| AUTHORIZATION :  | Sycholeson -    |  |  |  |  |
| COST LIMIT :   | \$ 25.0         |  |  |  |  |
| ORDER DATE : December 31, 2024                                     |                 |  |  |  |  |
| ORDER TIME : 9:25 AM   |                 |  |  |  |  |
| ORDER NO. : 866115-015   |                 |  |  |  |  |
| CUSTOMER NO: 4321040   |                 |  |  |  |  |
| DOMESTIC AMENDMENT FILING  NAME: TERAWAVE, LLC                     |                 |  |  |  |  |
| EFFECTIVE DATE:  |                 |  |  |  |  |
| ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION           |                 |  |  |  |  |
| PLEASE RETURN THE FOLLOWING AS PR                                  | OOF OF FILING:  |  |  |  |  |
| CERTIFIED COPY  XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING |                 |  |  |  |  |

EXAMINER'S INITIALS: \_\_\_\_

CONTACT PERSON: Shauna Godbolt -- EXT#

## **COVER LETTER**

| TO:                       | Registration :<br>Division of C   |  |   |   |  |  |  |
|---------------------------|---|--|---|---|--|--|--|
| SUBJ                      | JECT: Terawave  |  |   |   |  |  |  |
|                           | Name of Florida Limited Liability Company                                       |  |   |   |  |  |  |
| Limit                     |   |  | ee(s) are submitted to c<br>r Business Entity" in a |   |  |  |  |
| Please                    | e return all corr   | espondence concernin                               | g this matter to:                                   |   |  |  |  |
| Fred S                    | ussman  |  |   |   |  |  |  |
|                           | -   | Contact Person                                     |   |   |  |  |  |
| Teraw                     | ave, Inc.   |  |   |   |  |  |  |
|                           |   | Firm/Company                                       |   |   |  |  |  |
| 2975 H                    | Horseshoe Dr. S, S  | Suite 500  |   |   |  |  |  |
|                           | <u> </u>  | Address  | · · · · · · · · · · · · · · · · · · ·               |   |  |  |  |
| Naples                    | s, FL 34104   |  |   |   |  |  |  |
|                           | (   | City, State and Zip Code                           |   |   |  |  |  |
| fred@                     | terawave.us   |  |   |   |  |  |  |
| _                         |   | be used for future annual i                        | report notification)                                |   |  |  |  |
|                           |   |  |   |   |  |  |  |
| Por III                   | iitner informati  | on concerning this ma                              | mer, piease can:                                    |   |  |  |  |
| Fred S                    | ussman  |  | at (636) 896-                                       | -5700   |  |  |  |
| N                         | Name of Contact P   | erson  | Area Code and Day                                   | time Telephone Number   |  |  |  |
| Enclo                     | sed is a check  | for the following amou                             | int:  |   |  |  |  |
| □ \$25                    | 5.00 Filing Fee   | \$30.00 Filing Fee<br>and Certificate of<br>Status | S55.00 Filing Fee and Certified Copy                | ☐ \$60.00 Filing Fee. Certified Copy. and Certificate of Status     |  |  |  |
| Regis<br>Divisi<br>P.O. I | ng Address:<br>tration Section<br>ion of Corporat<br>Box 6327<br>nassee, FL 323 |  |   | Section<br>Corporations<br>of Tallahassee<br>nroe Street, Suite 810 |  |  |  |

CR2E106 (05/17)

FILED

2025 JAN -2 AM 10: 43

## TALLAHASSEE, FLORIDA

## Articles of Conversion For Florida Limited Liability Company Into

"Converted or Other Business Entity"

The Articles of Conversion is submitted to convert the following Florida Limited Liability Company into an "Other Business Entity" in accordance with s. 605.1045, Florida Statutes.

| 1. The name of the Florida Limited Liability Company converting into the "Other Business Entity" is:  |
|---|
| Terawave, LLC   |
| Enter Name of Florida Limited Liability Company   |
| 2. The name of the "Converted or Other Business Entity" is:   |
| Terawaye, Inc.  |
| Enter Name of "Converted or Other Business Entity"  |
| 3. The "Converted or Other Business Entity" is a  |
| organized, formed or incorporated under the laws of Delaware  (Enter state, or if a non-U.S. entity, the name of the country)  The formation document is attached (if applicable).  |
| 4. The plan of conversion was approved by the converting Florida Limited Liability Company in accordance with Chapter 605, F.S.   |
| 5. This conversion shall be effective in Florida on:  (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 of the conversion under the laws governing the "Other Business Entity.") |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date  |

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

- 6. If the "Converted or Other Business Entity" is an out-of-state entity not registered to transact business in Florida, the "Converted or Other Business Entity":
  - a.) Lists the following street and mailing address of an office the Florida Department of State may send and process served on the department pursuant to 605.0117 and Chapter 48.

| Street Address:      | Address:   |                    |  |  |  |
|----------------------|--|--------------------|--|--|--|
|                      | 2975 Horseshoe Dr. S, Suite 500  |                    |  |  |  |
| Mailing Address:     | Naples, FL 34104   |                    |  |  |  |
|                      |  | <u> </u>           |  |  |  |
|                      | Other Business Entity" has agree<br>amount to which such members<br>1072, F.S. |                    |  |  |  |
| Signed this 31st     | day of   | , 20 <sup>24</sup> |  |  |  |
| Signature:           | Any ENUL SOCIETY   | A 10               |  |  |  |
|                      | Must be signed by a Member or Au   | •                  |  |  |  |
| Printed Name: Gary F | Title: Aut   | horized Signatory  |  |  |  |
| Fees: Filing Fee:    | \$25.00  |                    |  |  |  |
| Certified Copy       | y: \$30.00 (Optional)  | )                  |  |  |  |
|                      | Status: \$5.00 (Optional)  |                    |  |  |  |

Page 2 of 2

866115-15

2025 JAN -2 AM 10: 4: