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(Requestor's Name)
(Address)
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(,,,,,,,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to Filling Officer.
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T. HAMPTON

FEB 1 8 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Wave Developme	nt LLC
1)	Name of Limited Liability Company)
	Limited Liability Company for Authorization to Transact Business in check are submitted to register the above referenced foreign limited in Florida
Please return all correspondence conce	erning this matter to the following:
Andrew Robinson	l ,
	(Name of Person)
Mallery & Zimmer	man, S.C.
	(Firm/Company)
731 North Jackso	n Street, Suite 900
	(Address)
Milwaukee, WI 53	202
<u> </u>	(City/State and Zip Code)
For further information concerning this	s matter, please call:
Andrew Robinson	at (414) 727-6263
(Name of Person	(Area Code & Daytime Telephone Number)
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following a \$125.00 Filing Fee \$130.00	imount: Filing Fee & \$\sumsymbol{\sum}\$\$155.00 Filing Fee & \$\sumsymbol{\sum}\$\$\$\$160.00 Filing Fee, Certificate Certificate of Status & Certified Copy of Status & Certified Copy



A Limited Liability Service Corporation

731 North Jackson Street • Suite 900 • Milwaukee, Wisconsin 53202-4697 Telephone: 414-271-2424 • www.mzmilw.com • Facsimile: 414-271-8678

Direct Dial: 414-727-6263 Facsimile: 414-271-8678

e-mail: arobinson@mzmilw.com

February 16, 2009

VIA OVERNIGHT DELIVERY

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Ladies and Gentlemen:

RE: Wave Development LLC

I enclose the following documents:

- 1. Application By Foreign Limited Liability Company for Authorization to Transact Business in Florida;
- 2. Certificate of Designation of Registered Agent/Registered Office;
- 3. Original Certificate of Existence; and
- 4. Check in the amount of \$130.00.

Please file these documents and return a file-stamped copy to me in the envelope provided. If you have any questions, please contact me.

Yours truly,

Andrew Robinson

AR/dm

Enclosure

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC	λ") 	_
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a consent of the managers or managing members adopting the alternate name. The alternate name must include "Limit Company," "L.L.C.," "LLC.")		
2. Wisconsin 3. 20-2718403		
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		
4. <u>4/14/2005</u> 5. Perpetual		_
(Date of Organization) (Duration: Year limited liability company will c exist or "perpetual")	ease to	_
_{6.} March 1, 2009		
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)		
_{7.} 731 North Jackson Street, Suite 818	09 FEB	ISIVI 33S
Milwaukee, WI 53202	8	- SET
(Street Address of Principal Office)	- =	. CO.
8. If limited liability company is a manager-managed company, check here 🗸	AH II:	Y OF STATE CORPORATIONS
9. The name and usual business addresses of the managing members or managers are as follows:	15	SNOI
Mark Flaherty, Edward Carow		_
731 North Jackson Street, Suite 818		
Milwaukee, WI 53202		
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custo the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign lang translation of the certificate under eath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Consultants		cords in
Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)		,

Typed or printed name of signee

Edward G. Carow

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

Wave Development LLC		
If name unava	ilable, the alternate name to be used in the state of Florida is:	
2. The name a	nd the Florida street address of the registered agent and office are:	
	CT Corporation System	
	(Name)	
	1200 S. Pine Island Road	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	· .
	tioning buser Gariers (1.10. new 1205 Upon Upon)	
	Plantation 33324 FL	

Having been named as registered agent and to accept service of process for the above stated limited liability 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 as provided for in Chapter 608, Florida Statutes.

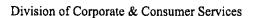
Kristine Heiberger
Assistant Secretary

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

United States of America State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS





To All to Whom These Presents Shall Come, Greeting:

I, RAY ALLEN, Deputy Administrator, Division of Corporate & Consumer Services, Department of Financial Institutions, do hereby certify that

WAVE DEVELOPMENT LLC

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is April 14, 2005.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that it has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on February 16, 2009.

RAY ALLEN, Deputy Administrator
Division Of Corporate & Consumer Services
Department of Financial Institutions

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.

DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: http://www.wdfi.org/apps/ccs/verify/

Enter this code:

62947-B05D755A