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Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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C. LEWIS

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EXAMINER

COVER LETTER

<u>.</u> .	•	COV				
TO: Registration of	n Section Corporations	, viii	क अंध			
SUBJECT:	WAVE	Name of Lim	ited Liability Co	しして mpany	<u></u>	
The enclosed "Appli Existence, and check	cation by Foreign Limited are submitted to register	Liability Com the above refer	pany for Authori renced foreign lir	zation to T nited liabili	ransact Business in Fl ty company to transac	orida," Certificate of t business in Florida
Please return all corr	respondence concerning th	nis matter to the	e following:			
		David	La Co	osky		
		Na	me of Person			
	Direct	Boat	Sale	5 , L	46	
<u> </u>	5 8	59	Rolling	Pi	nes Dr.	****
			Address		•	
	N	APLES	, FL	34	1110	
	,	City/St	ate and Zip Code	e		
	E-mail addr	CSS: (to be used	Me of future annual	CO r	(ification)	
To a Coult on the Comment					,	
	ion concerning this matter	-				
Da	Name of Person	KY Aras	_at (239	2 <u>3</u>	25-827	9
	Name of Ferson			ic reiephor	ic Millioer	
	327	Divisio Registra Clifton 2661 E	ET ADDRESS: n of Corporation ation Section Building xecutive Center (ssee, FL 32301			
Enclosed is a che	eck for the following a	mount:				
\$125.00		Filing Fee & cate of Status	\$155.00 Fi	ling Fee & ified Copy	\$160.00 Filing of Status &	Fee, Certificate Certified Copy

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, de	o hereby certify that we are the Managers and/or Managing
Members of WA	VE CONSULTING LLC (Name of Limited Liability Company)
	(Name of Limited Liability Company)
a limited liability comp	any duly organized and existing under the laws of
DELAWAR	E_
(State or Cou	untry of Organization)
Because the name of the	is foreign limited liability company does not satisfy the
requirements of the s. 6	08.406, F.S., the limited liability company hereby adopts the
——————————————————————————————————————	sact business in the state of Florida:
Dice	bility company in Florida. NOTE: Name must end with Limited Li
(Name to be used by limited lia Company, L.L.C., or LLC.)	bility company in Florida. NOTE: Name must end with Limited Liability
Date: 6/28/10	
Signature(s) of Manage	r(s) and/or Managing Member(s):
Olly	Chotopher Dyant 3
20	Charles Stroll hast
· · · · · · · · · · · · · · · · · · ·	
	

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

IN COMPLIANCE WITH SECTION 608.503. 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.") Direct Boat Sales, LLC (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") Jelauare

(Jurisdiction under the law of which foreign limited liability

(FEI number, if applicable) company is organized) exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: ROAT DESALES 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

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.

1. The name of the Limited Liability Company is:	
WAVE CONSULTING, LLC	
If unavailable, the alternate to be used in the state of Florida is:	
Direct Boat SALES, LLC	
2. The name and the Florida street address of the registered agent and office are:	,.
David Lacusky [Name] S859 Rolling Piges D(1
	TI ED
Florida Street Address (P.O. Box NOT ACCEPTABLE) NAPLAS FL 34110 City/State/Zip	
Having been named as registered agent and to accept service of process for the above stated limited	

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.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "WAVE CONSULTING, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTY-EIGHTH DAY OF JUNE, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WAVE CONSULTING, LLC" WAS FORMED ON THE FIFTH DAY OF JANUARY, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

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100696978

jeffrey W Bullock, Secretary of State
AUTHENTY CATION: 8082974

DATE: 06-28-10

You may verify this certificate online at corp.delaware.gov/authver.shtml