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COVER LETTER

TO: Amendment Section,
Division of Corporations

NAME OF CORPORATION: THE SEVENTH WAVE, INC.

DOCUMENT NUMBER: P00000033676

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Stephanie Lourmais
(Name of Contact Person)

(Firm/ Company)

107 PARK LANE EAST
(Address)

HYPOLUXO, FL 33462
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

Stephanie Lourmais at (561) 801-0881
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$35 Filing Fee

\$43.75 Filing Fee &
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\$52.50 Filing Fee
Certificate of Status
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Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

The date of each amendment(s) adoption: 7/1/05

Effective date if applicable: 7/1/05
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval by _____"
(voting group)

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this 1st day of July, 2005.

Signature Stephanie Lourmais
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

STEPHANIE LOURMAIS
(Typed or printed name of person signing)

Vice President
(Title of person signing)

FILING FEE: \$35