

2022 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L17000230680

Entity Name: 2ND WAVE DEVELOPMENT LLC**Current Principal Place of Business:**5300 W. CYPRESS ST.
SUITE 200
TAMPA, FL 33607**Current Mailing Address:**5300 W. CYPRESS ST.
SUITE 200
TAMPA, FL 33607 US**FEI Number:** 82-3350102**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FANELLI LAW FIRM, PA
5300 W. CYPRESS ST.
SUITE 200
TAMPA, FL 33607 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR, COO
Name SEMBLER, MARK S
Address 5300 W. CYPRESS ST., STE. 200
City-State-Zip: TAMPA FL 33607

Title SR. VP, AUTHORIZED
REPRESENTATIVE
Name SIEBEN, ALISSA
Address 5300 W. CYPRESS ST.
SUITE 200
City-State-Zip: TAMPA FL 33607

Title CEO
Name KEENE, BRUCE R
Address 5300 W. CYPRESS ST.
SUITE 200
City-State-Zip: TAMPA FL 33607

Title AUTHORIZED REPRESENTATIVE
Name GERHARD, STEPHEN
Address 5300 W. CYPRESS ST.
SUITE 200
City-State-Zip: TAMPA FL 33607

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARK S SEMBLER**MANAGER****04/29/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date