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T. SCOTT

FEB 1 0 2015

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Spirit, INC Name of corporation - must include suffix
Name of corporation - must include suffix
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
William M. Nidiffer
Name of Person
Spirit, INC
Firm/Company
2111 EAST MichigAN STREET
Address
ORIANDO FL 32806 City/State and Zip code
City/State and Zip code
william ethespirit project. com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
11. Wes AR INT.
William Widiffue at 407 717-4558 Name of Person Area Code & Daytime Telephone Number
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: MAILING ADDRESS:
New Filing Section New Filing Section Division of Comparations
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301
Enclosed is a check for the following amount:
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. 1. Spirit INC. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp. Spirit Solutions Inc.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 2. Delaware 3. 30-0743978 (State or country under the law of which it is incorporated) (FEI number, if applicable) Date of incorporation)

5. Perpetun

(Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. ZIII EAST Michigan Street ORlando, FL32806
(Principal office address)

6113 Oxbow Bend Lane Port Ormyc, FL 32128
(Current mailing address) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) William M. Nidiffen Name: 6113 Oxbow Bend LANE Office Address: Port Orange, Florida 32/28 (Zip code) 9. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my

(Registered agent's signature)

duties, and I am familiar with and accept the obligations of my position as registered agent.

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

A. DIRECTORS
Chairman: William Michifler
Address: 61130x60w Bewd LANC
PORTORANGE, FL ZZ128
Vice Chairman: FRIC NIN FLOW
Address: 6113 OxbourBeachlane
PORT ORANGE FL 32128
Director: Sepu Mc Fluarry
Address: 5526 Finbasey Street
Pine Constle, FL 32809
Director:
Address:
B. OFFICERS
President: William Wide Falk
Address: 613 Ox low Bend Lane
BR+ ORANGE, FL 32128
Vice President: Fric Nichther
Address: 6(130x60wBendLowe
PORT ORANGE FL 32128
Secretary: Monica Pustevosky
Address: 4244 SAXON DRIVE
Address: Rey Tiledo Estad Accounting 5228 Lake Margard Dr. Oxlando, F
3 2 8/ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12
Signature of Director or Officer
The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated here:
are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.
Internalistation Dia ton Daniel t
(Typed or printed name and capacity of person signing application)



PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "SPIRIT, INC." IS DULY INCORPORATED

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

AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF

THIS OFFICE SHOW, AS OF THE TWENTY-SIXTH DAY OF JANUARY, A.D.

2015.

5183548 8300

150094349

AUTHENTYCATION: 2066257

DATE: 01-26-15

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