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· TRANSMITTAL LETTER

| FO: Registration Section Division of Corporations | |
|--|---|
| SUBJECT: Spirit Choica Properties Inc. (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," and check are submitted to register the above referenced foreign corporation to ransact business in Florida. | |
| Please return all correspondence concerning this matter to the following: | |
| JASON Stanley (Name of Person) | |
| (Name of Person) | |
| Stanley Homes Inc | |
| (Firm/Company) | |
| 100 N. Wickham Pd #240= | |
| Melbourne FL 32935 | |
| (City/State and Zip code) | , |
| For further information concerning this matter, please call: | 7 |
| (Name of Person) at (321) 254-8455 (Area Code & Daytime Telephone Number) | |
| (Maine of Forson) (Their code to Daytime Telephone Names) | |
| STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 MAILING ADDRESS: Registration Section Division of Corporations PO. Box 6327 Tallahassee, FL 32314 | |
| Enclosed is a check for the following amount: | |
| \$70.00 Filing Fee \$\Bigcup \\$78.75 Filing Fee & \$\Bigcup \\$78.75 Filing Fee & \$\Bigcup \\$87.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy | |



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 26, 2005

JASON STANLEY STANLEY HOMES INC 700 N WICKHAM RD E210 MELBOURNE, FL 32935

SUBJECT: SPIRIT CHOICE PROPERTIES, INC.

Ref. Number: W05000035497

We have received your document for SPIRIT CHOICE PROPERTIES, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Diane Cushing Document Specialist

Letter Number: 905A00048691

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 | Choice Prope | nties : | Enc. | | | | |
|---------------------|------------------------------|--|--|-----------------------|-------------------|--------------------|----------|
| (Enter name of co | rporation; must include " | INCORPORA | TED," "CO | MPANY," " | CORPORATI | ON," | _ |
| "Inc.," "Co.," "Co | orp," "Inc," "Co," or "Cor | p.") | | | | | |
| | | | | | | | |
| | - | ······································ | ************************************** | The same as a light a | 7 70 3 1 3 | | |
| (If name unavaila | ble in Florida, enter alteri | nate corporate i | name adopte | d for the purp | ose of transac | ting business in I | -lorida) |
| 2. New Y | oek | | 3 | | | | _ |
| (State or country u | nder the law of which it | is incorporated | <u>=</u> | (FE | I number, if a | oplicable) | |
| 4. Janua | of incorporation) | 5 | _ 5 | Peep | etval | | |
| (Date | of incorporation) | | (Dura | ation: Year co | orp. will cease | to exist or "perp | etual") |
| 6 | · | | | | | | |
| | | ransacted busin | | | | | |
| | (SEE SECTIONS | | | | | ility) | |
| 7. <u> </u> | Lextour , | Rd | Dix | Hills | _ <u>N Y</u> | #746 | <u> </u> |
| | | Principal offic | e address) | | , , | | |
| 5 | Yorktown | Rd | Dix | Hills | 114 | 1746 | ;] |
| | (| Current mailin | g address) | | | (SH) | |
| Ø | 1 : | | | _ | | | |
| 8 <i>Kt</i> | AL ESTATE | | | | · | <u></u> | 7 |
| (Purpose(s) | of corporation authorize | d in home state | or country t | o be carried o | out in state of l | lorida) — | · |
| 9. Name and street | address of Florida reg | istered agent: | (P.O. Box | NOT accep | table) |) 트 | |
| Name: | EddA Low | cine Mo | DAVIT | H . | | | |
| Office Address: | _ | nut De | | • | • | | |
| | , a | _ | | ~1 | 20- 2 | | |
| | India lan | <u> 4C-</u> | | Florida | <u>کـ40</u> ک | | |
| | (Cı | ıy) | | (2 | ip code) | | |

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

(Registered agent's signature)

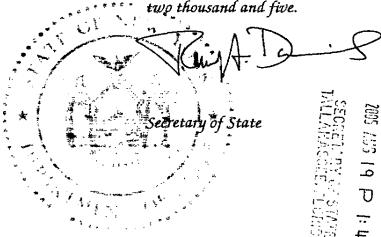
- 11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.
- 12. Names and business addresses of officers and/or directors:

| A. DIRECTORS | • |
|---|--|
| Chairman: | ALCOHOLOGIC TORREST AND THE STATE OF THE STA |
| Address: | A CONTRACTOR OF THE CONTRACTOR |
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| Vice Chairman: | And the state of t |
| Address: | The second secon |
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| Director: | consider to take the design of the control of the c |
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| 2 | AS 28 |
| B. OFFICERS | |
| President: Comes Vantas | 1 |
| Address: 5 Joettown Rd | Dix Hills NY HILL |
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| | |
| Vice President: | |
| Address: | Provide and the second |
| Δ | 7 / |
| Secretary: Delinish L | Mary . |
| The colorest | Dix Hills XV 11746 |
| Address: 5 10000 to | |
| Treasurer: | The second of th |
| Address: | Company of the State of the Sta |
| | \mathcal{L}_{α} |
| NOTE: If necessary, you may attach an adden | dum to the application listing additional officers and/or directors |
| 13. Cans Carl | Officer listed in number 12 of the application) |
| | |
| 14. JAMES JankAY — (Typed or printed name | e and capacity of person signing application) |

State of New York . | ss: Department of State

I hereby certify, that the Certificate of Incorporation of SPIRIT CHOICE PROPERTIES, INC. was filed on 01/07/2005, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

Witness my hand and the official seal of the Department of State at the City of Albany, this 04th day of August two thousand and five.



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