



FILED
Apr 17, 2008 08:00 A]
Secretary of State

DOCUMENT # L02000006305				Apr 17, 2008 08:00 Secretary of State	
1. Entity Name SPIRIT INVESTMENTS, LLC					
Principal Place of Business 30403 ORANGE DR. LEESBURG, FL 34748		Mailing Address 30403 ORANGE DR. LEESBURG, FL 34748			
DO NOT WRITE IN THIS SPACE					
		01172008No Chg-LLC CR2E083 (12/07)			
		4. FEI Number 03-0424591		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent BRADY, BETTY C 30403 ORANGE DR. LEESBURG, FL 34748		DO NOT WRITE IN THIS SPACE			
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75					
9. MANAGING MEMBERS/MANAGERS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		MGR BRADY, BETTY C 30403 ORANGE DR. LEESBURG, FL 34748			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		VP BRADY, RONALD E JR 2030 SEPLER DR CASSELBERRY, FL 32730			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		VP BRADY, EARNEST A III 1156 CITRUS OAKS RUN WINTER SPRINGS, FL 32708			
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.					
SIGNATURE: <i>Betty C Brady</i> 4-7-08 352-315-0979					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					