2006 LIMITED LIABILITY COMPANY

DOCUMENT # L05000050934



FILED Jun 09, 2006 8:00 am Secretary of State

1. Entity Name MORRIS INVESTMENT GROUP, LLC					05-03-2006	90036 048 *	***50.00	
Principal Place of Business 12737 MONTEVISTA ROAD CLERMONT, FL 34711		Mailing Address 12737 MONTEVISTA ROAD CLERMONT, FL 34711						
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01182006	Chg-LLC	CR2E083 (11	/05)	
City & State		City & State		4. FEI Numbe 20 - 20	389976		Applied For Not Applicable	
Zip	Country	Zip	Country	i i	of Status Desired	□ \$5.00 Fee Re) Additional	
-	6. Name and Address of Current I	Registered Agent	Name	7. Name and	Address of New R	eglatered Agent		
KOEHNE, KENDALL 12737 MONTEVISTA ROAD CLERMONT, FL 34711			Street Addres	Street Address (P.O. Box Number is Not Acceptable)				
CLERMON	11, FL 34/11							
			City	FL Zip Code				
8. The above the obligat	named entity submits this statement for ions of registered agent.	the purpose of changing its r	egistered office or regis	stered agent, or bot	h, in the State of Flo	rida. I am tamiliar	with, and accept	
SIGNATURE .	Signature, typed or princed name of registered agent a	nd trie if applicable (NOTE.	Registered Agent signisture requ	tured when reinstading)		DATE		
Filing Fee is \$50.00 Due by May 1, 2006						check payable Department of		
9.	MANAGING MEMBE		10.	L	ADDITIONS/			
TITLE HAME STREET ADDRESS CITY-ST-ZIP	MGRM KOEHNE, KENDALL 12737 MONTEVISTA ROAD CLERMONT, FL 34711	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP			☐ Cha	ange 📑 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MULLANY, ALISON 6200 CALVIN LEE ROAD GROVELAND, FL 34736	☐ Delete	TITLE HAME STREET ADDRESS CITY-ST-ZIP			☐ Cha	ange 🔲 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Cha	inge 🔲 Addition	
NAME STREET ADDRESS CITY-ST-ZIP		Oekte	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Cha	inge 🔲 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Celete	TITLE NAME STREET ADDRESS CITY-SI-ZIP			☐ Cha	inge 🗌 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-SI-ZIP			☐ Cha	Inge Addition	
indicated		that my signature shall have the	he same legal effect as eport as required by Ch	hapter 608, Florida S	that I am a manag statutes.	other certify that the ling member of ma	nager of the	



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

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May 15, 2006

MORRIS INVESTMENT GROUP, LLC 12737 MONTEVISTA ROAD CLERMONT, FL 34711

Subject: MORRIS INVESTMENT GROUP LLC

Reference Number

L05000050934

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report has not been filed and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/lb ANNUAL REPORTS SECTION