2008 LIMITED LIABILITY COMPANY

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000073097

WAYCROSS INVESTMENTS, LLC

Principal Place of Business

18 WINDSOR ISLE DRIVE LONGWOOD, FL 32779

Mailing Address

18 WINDSOR ISLE DRIVE LONGWOOD, FL 32779

FILED Apr 28, 2008 08:00 AN Secretary of State



02252008 No Chg-LLC

CR2E083 (12/07)

4.	FEI Number
	20-3197463

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

TURNER, BEVERLY 18 WINDSOR ISLE DRIVE LONDWOOD, FL 32779

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	e named entity submits this statement for the purpose of char tions of registered agent.	nging its registered office or registered agent, or both	i, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE Registered Agent signature required when reinstating)	DATE
Jan Jangara FILE	E NOWIII FEE IS \$138.75 y 1, 2008 Fee will be \$538.75		000000929451 05/21/08-80071-003 138.75
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGR TURNER, BEVERLY 18 WINDSOR ISLE DRIVE LONGWOOD, FL 32779		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN 7	THIS SPACE
NAME STREET ADDRESS CITY-ST-ZIP			
TITLE TO A TO A	Weeks,		

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

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE