2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000095802

KASZUBSKI, MAREK

City-St-Zip: CHEVY CHASE, MD 20815

7117 EDGEVALE STREET

Name:

Address:

Entity Name: VIRTUE INVESTMENTS, LLC

FILED Oct 12, 2006 Secretary of State

| Current Principal Place of Business: | | New Principal Place of Business: | |
|--|--|---|---|
| 8552 GREAT MEADOWS DR. SARASOTA, FL 34238 | | 8552 GREAT MEADOW DR. SARASOTA, FL 34238 | |
| Current Ma | ailing Address: | New Mailin | ng Address: |
| 8552 GREAT MEADOWS DR. SARASOTA, FL 34238 | | 8552 GREAT MEADOWSDR. SARASOTA, FL 34238 | |
| FEI Number: In accordance | 20-3583303 FEI Number Applied For () FEI Nue with s. 607.193(2)(b), F.S., the limited liability company did | mber Not Applic not receive the | |
| Name and | Address of Current Registered Agent: | Name and A | Address of New Registered Agent: |
| 8154 INDIG UNIVERSIT | D, V. VICTORIA O RIDGE TERRACE TY PARK, FL 34201 US named entity submits this statement for the purpose of Florida. | of changing its | s registered office or registered agent, or both |
| SIGNATUR | RE: V. VICTORIA COPELAND | | |
| OIOINATOIN | Electronic Signature of Registered Agent | | Date |
| MANAGING MEMBERS/MANAGERS: | | ADDITIONS/CHANGES: | |
| Title: Name: Address: City-St-Zip: | MGR () Delete SHAREEF, JAMAL 13531 WESTHIRE DRIVE TAMPA, FL 33618 | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | MGRM () Delete COPELAND, V. VICTORIA 8154 INDIGO RIDGE TERRACE UNIVERSITY PARK, FL 34201 | Title: Name: Address: City-St-Zip: | MGRM (X) Change () Addition COPELAND, V. VICTORIA 1824 IRONWOOD COURT VENICE, FL 34293 |
| Title: Name: Address: City-St-Zip: | MGRM () Delete DEGUIDICE, MARGARET 8552 GREAT MEADOWS DR. SARASOTA, FL 34238 | Name: Address: | MGRM (X) Change () Addition DELGUIDICE, MARGARET 8552 GREAT MEADOW DR. SARASOTA, FL 34238 |
| Title: | MGRM () Delete | Title: | () Change () Addition |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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.

Name:

Address:

City-St-Zip:

SIGNATURE: MARGARET DELGUIDICE MGRM 10/12/2006