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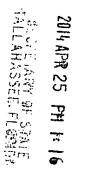
(Requestor's Name)
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PICK-UP WAIT MAIL
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SPIRIT PRODUCTS, LLC
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JEFF LASLEY (Name of Person)	-	
(Firm/Company)	- <u>180</u> 8 or	113
3150 FLORIDA COACH DR	ECATIA LLAHAS	ZUIN APR 25
KISSIMMEE, FL 34741 (City/State and Zip Code)	- 1938 - 1938 - 1938	25 PH
rmation concerning this metter places call.		7

For further information concerning this matter, please call:

C. Michael Magruder, Esq. at (407) 870 - 8900 (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee and Certificate of Dissolution

\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is
	SPIRIT PRODUCTS, LLC
2.	The Articles of Organization were filed on Nov. 19, 2012 and assigned document number L 12000145754
3.	The delayed effective date the dissolution if not effective on the date of filing:
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter). BUSINESS ANEXODO DO SET
	wanted to pursue
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: C. MICHAEL MAGRUDER, RESEARCH 203 S. Clyde Ave KISSIMMLL, FL 3474
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs:
	Signature Printed Name
つ 二	Muchael MAGRUDER RESIDENT OSEDA
	FILING FEE: \$25.00