

# M98000000238

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: Automated Profile Management, LLC  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

John Moyer  
(Name of Person)  
Automated Profile Management, LLC  
(Firm/Company)  
9838 Old Baymeadows Rd. Ste. 170  
(Address)  
Jacksonville, FL 32256  
(City/State/Zip)

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98 MAR 10 PM 3:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Should you need to call someone concerning this matter, please call:

300002441793--0  
-02/26/98--01083--001  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

John Moyer at (904) 210.0372  
(Name of Person) (Area Code & Daytime Telephone Number)

100002452351--5  
-03/10/98--01064--001  
\*\*\*\*215.00 \*\*\*\*215.00

Name Available	<u>John Moyer</u>
Document Examiner	<u>John Moyer</u>
Updater	<u>John Moyer</u>
Updater Verifier	<u>John Moyer</u>
AS, no assignment	<u>John Moyer</u>
W. P. Verifier	<u>John Moyer</u>

CARRIER ADDRESS:  
Qualification/Tax Lien Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

MAILING A

Qualification/Tax Lien Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

March 3, 1998

JOHN MOYER  
AUTOMATED PROFILE MANAGEMENT LLC  
9838 OLD BAYMEADOWS RD, STE 170  
JACKSONVILLE, FL 32256

SUBJECT: AUTOMATED PROFILE MANAGEMENT, LLC  
Ref. Number: W98000004689

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TALLAHASSEE, FLORIDA

We have received your document for AUTOMATED PROFILE MANAGEMENT, LLC and check(s) totaling \$70.00 of which \$70.00 has been designated to file this document. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is an additional amount of \$215.00 due. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

Effective April 23, 1997, the fees to qualify a foreign limited liability company total \$285.00 and breakdown as follows: \$250.00 filing fee for the application and affidavit and \$35 registered agent designation fee. An additional \$52.50 is due for each certified copy requested and an additional \$8.75 is due for each certificate of status requested.

You have completed the wrong application. Please complete the attached form for a Limited Liability Company.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6913.

Diane Cushing  
Corporate Specialist

Letter Number: 698A00011707

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. Automated Profile Management LLC  
(Name of foreign limited liability company must end with the words "limited company" or their abbreviation "L.C." if not so contained in the name at present.)
2. New Hampshire 3. 02-0496770  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. January 1 1998 5. January 1 2017  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. Jan 1 1998  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 9838 Old Baymeadows Rd. Suite 170  
Jacksonville FL 32256  
(Street address of principal office)

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 OF FLORIDA

8. List name, title, and business address of each managing member[MGRM] or manager[MGR]who will manage the foreign limited liability company in Florida: (attach additional page if necessary)

NAME & ADDRESS:	TITLE:	NAME & ADDRESS:	TITLE:
<u>John Moyer</u>	<u>Mgr.</u>	<u>8225 BayTree Ln</u>	
_____		<u>Jacksonville, FL 32256</u>	
_____		_____	
<u>Eric Voskuil</u>	<u>Mgr.</u>	<u>8787 Southside Blvd. # 5504</u>	
_____		<u>Jacksonville, FL 32256</u>	
_____		_____	
<u>Mark Johnson</u>	<u>Mgr.</u>	<u>1001 A. Alene Ave.</u>	
_____		<u>Ridgecrest CA 93555</u>	
_____		_____	

9. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

**AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY**


The undersigned member or authorized representative of a member of Automated Profile Management, LLC certifies:

1) the above named limited liability company has at least two members;

2) the total amount of cash contributed by the member(s) is \$ 15,000.00;

3) if any, the agreed value of property other than cash contributed by member(s) is \$ —;  
(A description of the property is attached and made a part hereto.)  
and

4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is \$ —;  
(This total includes amounts from 2 and 3 above.)

  
**Signature of a member or an authorized representative of a member.**  
(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

John D. Moyer  
Typed or printed name of signee

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**Filing Fee: \$250.00 for Application and Affidavit**

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Automated Profile Management, LLC

2. The name and the Florida street address of the registered agent and office are:

Lynda Devine  
(Name)

8225 Bay Tree Ln.  
Florida street address (P.O. Box **NOT** ACCEPTABLE)

Jacksonville, FL 32256  
City/State/Zip

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*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

Lynda A. Devine  
(Signature)

**Filing Fee: \$ 35 for Designation of Registered Agent**

*State of New Hampshire*  
*Department of State*

CERTIFICATE OF EXISTENCE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that AUTOMATED PROFILE MANAGEMENT, LLC is a New Hampshire limited liability company formed on January 12, 1998. I further certify that all fees required by the Secretary of State's office have been received and that a certificate of cancellation has not been filed.

IN TESTIMONY WHEREOF, I hereto  
set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 27th day of January, A.D. 1998

*William M. Gardner*

William M. Gardner  
Secretary of State

