	(Requestor's Name)			
	(Address)			
	(Address)			
	(Address)			
	(City/State/Zip/Phone #)			
PICK-UP	P WAIT	MAIL		
	(Business Entity Name)			
	(Document Number)			
	(Socialities Namber)			
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				

Office Use Only



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MAR 2 2021

Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com



ORDER FORM

TO Florida Department of State The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303 corphelp@dos.myflorida.com 850-245-6051

FROM

Melissa Moreau mmoreau@incserv.com 850.656.7953

_				
Ŗ	EQU	IEST	DATE	3/18/2021

PRIORITY Regular Approval

OUR REF_#_(Order_ID#) 901885

ORDER ENTITY_ APPLE COMPUTER INC.

PLEASE PERFORM THE FOLLOWING SERVICES: APPLE COMPUTER INC. (FL)	
File the attached withdrawal of alternate name.	
NOTES:	
\$35.00 Authorized	
\$35.00 Authorized	

RETURN/FORWARDING INSTRUCTIONS:____

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Friday, March 19, 2021 Page 1 of 1



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESOLUTION OF THE BOARD OF DIRECTORS TO WITHDRAW THE ALTERNATE NAME FOR USE IN FLORIDA

(Pursuant to section 607.1506 or 617.1506, F.S.)

(Please print or type)

I, the undersigned Sam Whittington	,	do hereby certify
(Name)	,	-
that this Resolution of the Board of Directors of		
Apple Inc.		
(Name of Corporati	on)	<u> </u>
a corporation duly organized and existing under the laws of	California	E.S.
	(State or Country)	구절
was adopted on January 4, 2007		withdrawing the alternat
name of Apple Computer Inc.		
(Current Alternate		·
in Florida as its real name is available in Florida.		
Date:		
574	Assistant Secretary	
Signature of Chairman, Vice Chairman of the Board, a	Title of pe	rson signing

FILING FEE \$35

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

director or any officer