

**L00000010401**

Requester's Name

1407 Piedmont Dr b  
Address

Tall, FL 32303 386-1863  
City/State/Zip Phone #

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-08/30/00--01001--010  
\*\*\*125.00 \*\*\*125.00

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. A.P.E. L.L.C.  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

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TALLAHASSEE

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Mail out

☐ Pick up time

☐ Will wait

☐ Photocopy

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☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

**OTHER FILINGS**

- ☐ Annual Report
- ☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

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DIVISION OF CORPORATIONS  
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3/29/29

Examiner's Initials

**ARTICLES OF ORGANIZATION  
OF  
A.P.E, L.L.C.**

The undersigned individual, acting as a member under the provisions of Chapter 608, Florida Statutes, adopts the following Articles of Organization:

**ARTICLE I**

**Name**

The name of this Limited Liability Company shall be **A.P.E., L.L.C.**

**ARTICLE II**

**Principal Place of Business and Mailing Address**

The principal place of business and mailing address of the Limited Liability Company shall be 1407 Piedmont Dr., Tallahassee, Florida 32312.

↑ EAST

**ARTICLE III**

**Duration**

The period of duration for the Limited Liability Company shall be perpetual, unless terminated by other provisions of these Articles of Organization.

**ARTICLE IV**

**Management**

The Limited Liability Company is to be managed by its members as set forth in its Regulations. The name and address of the initial member is:

**Name**  
Wm. Scott Lindsey

**Address**  
1407 Piedmont Drive East  
Tallahassee, Florida 32312

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## ARTICLE V

### Admission of Additional Members

Members of the Limited Liability Company may admit additional members, but only upon the unanimous approval of the existing members of the Limited Liability Company.

## ARTICLE VI

### Transfer of Member's Interest


The transfer of any member's interest in the Limited Liability Company, whether to an existing member or a non-member, requires unanimous approval of all members of the Limited Liability Company.

## ARTICLE VII

### Name and Address of Registered Agent

The name and address of the Registered Agent of the Limited Liability Company shall be Wm. Scott Lindsey, and his address is 1407 Piedmont Drive East, Tallahassee, Florida 32312.

IN WITNESS WHEREOF, the undersigned, the initial member of this Limited Liability Company, executes these Articles of Organization and certifies to the truth of the facts herein stated in the State of Florida, this 29th day of August 2000.

  
\_\_\_\_\_  
Wm. Scott Lindsey,  
Initial Member

State of Florida  
County of Leon

The foregoing Articles of Organization were acknowledged before me this 29th day of August 2000, by Wm. Scott Lindsey.

  
Notary Public



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

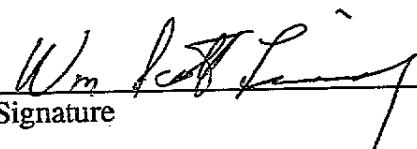
PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA:

1. The name of the limited liability company is A.P.C., L.L.C.
2. The name and address of the registered agent and office is:

Wm. Scott Lindsey  
1407 Piedmont Drive East  
Tallahassee, Florida 32312

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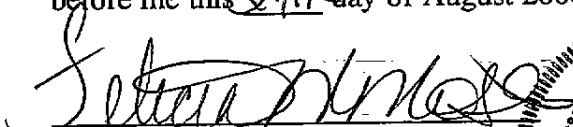
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED LIMITED LIABILITY COMPANY AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT OF REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL 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.

  
\_\_\_\_\_  
Signature

8/29/00  
\_\_\_\_\_  
Date

State of Florida  
County of Leon

The foregoing Certificate of Designation of Registered Agent / Office was acknowledged before me this 29th day of August 2000, by Wm. Scott Lindsey.

  
\_\_\_\_\_  
Notary Public

