2001 0	MILORM DOSI	NE33 KEPUI	KI	(UBK)			-	١.	,		
DOCUME  1. Entity Name	NT# L00000015	490	4	. ४		F	ILED		·		
APC INVESTMENTS, L.L.C.						01 APR 23 PM 4: 08					
Principal Place of Business · Mailing Address						SECRETARY OF STATE TALLAHASSEE, FLORIDA					
2. Principal Place of Business  II N.ORANGE AUE.  Suite, Apt. #, etc.  Suite, Apt. #, etc.				. DO NOTAMBLE IN THE COACE							
Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				<u>-</u>	-,			
City & State	FLORIDA	City & State		4. FEI Number Applied For S9 - 3687733 Not Applicable							
Zip 32801	Country	Zip	Count		5. Certi	ficate of Status Desired		5.00 Addee Require			
6.	Name and Address of Current R	egistered Agent			7. Name	and Address of New R	egistered Aç	jent		]	
		Name						}			
KERMIT L. James, Jr.				Street Addres	ss (P.O. Box N	lumber is Not Acceptable	)			-	
Swite 11								1			
ORLANDO, FLORIDA 32801				City			FL	Zip Cod	le	1	
8. The above name	d entity submits this statement for t	he purpose of changing its re	gistere	ed office or regis	stered agent, o	or both, in the State of Flo	rida.	_		]	
SIGNATURE				_							
Signatur	egistered	d Agent signature requ	ired when reinstati	ng)	DATE			-			
		FUE NOV	.,,,,							1	
		Make Check Paya		EE IS \$50.0			- <del></del>	-			
		make Check Paya	IDIO U	o <b>Deba</b> ranen	i di State					1	
9.	MANAGING MEMBER	RS/MEMBERS	10.			ADDITIONS/	CHANGES		·	1	
<del></del> _	ESIDEN T	Delete	TITLE		<del>.</del>			Change	Addition	[8	
NAME K	IRMIT L. JAMES, J	ሴ.	NAMI	E		•				E083 (11/00	
STREET ADDRESS 111 N. ORANGE AUE., STE 1100				et address						83	
CITY-ST-ZIP OR	LANDO, FL 32801	_,	CITY	-ST-ZIP		<u>.</u>	<u></u>				
TITLE VIC	E PRESIDENT	☐ Delete	TITLE				I	Change	☐ Addition	SR	
NAME ST	ANLEY E. CREEL	CTS ILAA	NAMI			200004	135	402	26		
	N. ORANGE AUE.,	31121100		ET ADDRESS -ST-ZIP		-05/04	4/01U	1008	-002	-	
	<del></del>	☐ Delete	TITLE	<del></del>	<del>-</del>		<del>*50.90</del> ,		SD.UU- Addition	1	
NAME JA	iasurer LK 5.0ppenheimer		NAMI				'	0.10.190			
STREET ADDRESS	N. ORANGE AVE. , S	75 110 O	STRE	et address							
	LANDO, FL 3280 1		CITY-	-ST-ZIP						]	
	CRETARY	☐ Delete	TITLE	: ]				Change	☐ Addition	}	
NAME M.C	MICHABL A. WACK										
				et address • St-Zip							
TITE'S	CANDO, PC 32801	☐ Delete	TITLE					Change	Addition	1	
NAME			NAM	1				,			
STREET ADDRESS CITY-ST-ZIP	<u></u>			ET ADDRESS -ST-ZIP							
TITLE 1		☐ Delete	TITLE					Change	☐ Addition		
NAME			NAME	ſ						1	
STREET ADDRESS CNTY-ST-ZIP				ST-ZIP							
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.											
SIGNATURE: Kermit Z. Dames J. Kermit L. James Jr. 4/19/01 407-425-4636  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytine Phone #											
										,	