# 2.0000008.83 3987 Ave S NW - Winder Haven, FI

	Office Use Only
CORPORATION NAME(S) & DOCUM	ENT NUMBER(S), (if known):
1- ADAT PROFIT CONT	PORATION LL
(Corporation Name)	(Document #) WO 1-28415
(Corporation Name)	(Document #)
(Corporation Name)	(Document #) 3000047048639 -12/04/0101091001 *****125.00 *****125.00
(Corporation Name)	(Document #)
<ul><li>□ Walk in</li><li>□ Pick up time</li><li>□ Mail out</li><li>□ Will wait</li></ul>	Certified Copy  Certificate of Status  Certificate of Status
NEW FILINGS  Profit Not for Profit Limited Liability Domestication	AMENDMENTS  Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger  ORDET STATE ORDET ST
Other	Merger O
OTHER FILINGS	REGISTRATION/QUALIFICATION
☐ Annual Report ☐ Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other
	Examiner's Initials

CR2E031(7/97)



#### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 12, 2001

NEAL HAMAD 3987 AVE. S. NW WINTER HAVEN, FL 33881

SUBJECT: NON PROFIT CORPORATION LLC

Ref. Number: W01000028415

We have received your document for NON PROFIT CORPORATION LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company cannot include the word "Corporation." Please also note that the statute does not provide for limited liability companies to be non-profit entities.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6958.

Letter Number: 901A00065448

Lee Rivers Document Specialist ·

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314



### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 31, 2001

NEAL HAMAD 3987 AVE. S. NW WINTER HAVEN, FL 33881

SUBJECT: NON PROFIT CORPORATION LLC

Ref. Number: W01000028415

We have received your document for NON PROFIT CORPORATION LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

I apologize for failing to inform you before that we cannot file a limited liability company with the name "Non Profit," because the statute doesnot provide for not-for-profit limited liability companies. Please select a different name or contact us to request a refund.

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) 245-6958.

Letter Number: 901A00067714

Lee Rivers Document Specialist DIVISION OF CORPORATIONS
02 JAN 11 PM 2: 01

# SHIP IT

## Here We Ship Anything Anywhere

Facsimile	JAN 1
Attention LEE RIVERS From	Neal Hamad 3
Company Fl. Dept of Div-of Capate	
Fax Number 8.50 - 410 - 1015	
Total pages including this cover 2	

Please Fax Back Asap to: 614-759-7243

I hanks Neal

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Jan-11-02 11:57am eceived JAN.11.2002

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: APEX LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

200 Devault Street Umatilla, F1 32784

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

lorida street address (P.O. Box NOT acceptable) City, State, and Zip

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 as provided for in Chapter 608, F.S.

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is therefore, a manager - managed company. 2

(An additional article must be added if an effective date is requested)

Signature of a member or an authorized representative of a member.

can accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of porjury that the facts stated herein are true.)

Hamao Typed or printed name of signed

Filing Foos:

- \$100.00 Filing Fee for Articles of Organization

S 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)