Division of Corporations

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# Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : FOWLER, WHITE, BURNETT, ET AL

Account Number : 071250001512 : (305)789-9200 Phone

Fax Number : (305)789-9201

## LIMITED LIABILITY COMPANY

APELSIN, LLC

Cartificate affiliable	
Certificate of Status	<u> </u>
Certified Copy	1
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### ARTICLES OF ORGANIZATION

**OF** 

### APELSIN, LLC

#### ARTICLE I

The name of the limited liability company formed hereby is APELSIN, LLC (the "Limited Lability Company").

#### ARTICLE II

The duration of the Limited Liability Company shall be perpetual.

#### ARTICLE III

The principal office and mailing address of the Limited Liability Company shall be as follows:

4420 N.W. 36th Avenue Gainesville, Florida 32606

#### **ARTICLE IV**

The Registered Agent of the Limited Liability Company and his street address in the State of Forica are as follows:

Howard W. Gordon, Esq. 100 S.E. 2nd Street, 17th Floor Miami, Florida 33131

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ARTICLE V

The Limited Liability Company shall be manager-managed.

as Authorized Representative of the Members

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

Before me personally appeared Howard W. Gordon, as Authorized Representative of the

Members, X who is personally known to me, or 🗆 who produced.

as identification, to be the person who executed the foregoing Articles of Organization.

In witness whereof I have hereunto set my hand and official seal this  $\int \int \int day$  of

Judith D. Rodman Atlantic Bonding Co., Inc.

My Commission expires:

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### CERTIFICATE OF DESIGNATION OF RESIDENT AGENT AND ACCEPTANCE OF DESIGNATION

FOWLER WHITE

Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned limited liabilary company organized under the laws of the state of Florida, submits the following statement in designating its Registered Office and Registered Agent in the State of Florida:

- 1. The name of the limited liability company is APELSIN, LLC.
- 2. The name and address of the Registered Agent and Office is:

Howard W. Gordon, Esq. 100 S.E. 2nd Street, 17th Floor Miami, Florida 33131

Having been named as Registered Agent and to accept service of process for the above stated limited liability company at the place designated in the 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 am familiar with and accept the obligations of my position as Registered Agent.

Howard W. Gordon, Registered Agent

ward W. Gordon,

Authorized Representative

of the Members

PEUSIN, LŁO

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