

L04000042106

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

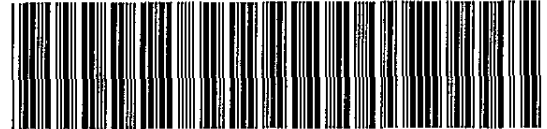
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200037415332

06/04/04--01010--010 **155.00

RECEIVED
04 JUN -4 AM 10:16
DIVISION OF CORPORATION

FILED
04 JUN -4 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Handwritten signature

Tim Leadbearer/Donna Marie Walters
Ausley & McMullen

Requestor's Name

227 S. Calhoun Street

Address

Tallahassee, FL 32301

425-5457

City/State/Zip

Phone #

Office Use Only

FILED
04 JUN -4 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

- | | | |
|----|---|--------------|
| 1. | <u>American Property Protection LLC</u> | <u>NEW</u> |
| | (Corporation Name) | (Document #) |
| 2. | <u></u> | <u></u> |
| | (Corporation Name) | (Document #) |
| 3. | <u></u> | <u></u> |
| | (Corporation Name) | (Document #) |
| 4. | <u></u> | <u></u> |
| | (Corporation Name) | (Document #) |

- | | | |
|---|---------------------------------------|--|
| <input checked="" type="checkbox"/> Walk in | <input type="checkbox"/> Will pick up | <input type="checkbox"/> Certified Copy |
| <input type="checkbox"/> Mail out | <input type="checkbox"/> Will wait | <input type="checkbox"/> Certificate of Status |

NEW FILINGS

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

AMENDMENTS

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

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

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

Examiner's Initials

AUSLEY & McMULLEN

ATTORNEYS AND COUNSELORS AT LAW

227 SOUTH CALHOUN STREET
P.O. BOX 391 (ZIP 32302)
TALLAHASSEE, FLORIDA 32301
(850) 224-9115 FAX (850) 222-7560
Writer's Direct Line: (850) 425-5457

FILED
04 JUN -4 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 4, 2004

Secretary of State
409 East Gaines Street
Tallahassee, Florida 32301

VIA HAND DELIVERY

Re: American Property Protection LLC

Dear Madam/Sir:

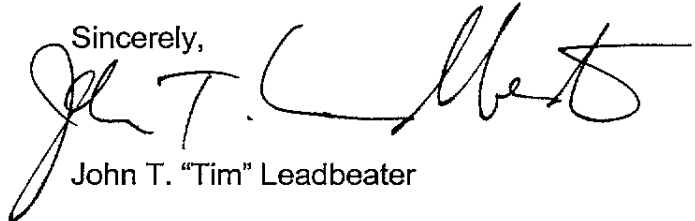
Enclosed are an original and one copy of the Articles of Organization for American Property Protection LLC, a limited liability company. These Articles include Registered Agent and Registered Office designation for this company.

This firm's check in the amount of \$155.00 is enclosed, comprised of the \$100.00 filing fee, \$25.00 Designation of Registered Agent fee, and \$30.00 certified copy fee.

Please do not hesitate to call me at (850) 425-5457 if you have any questions. We will have our messenger return to pick up the certified copy and the certificate of filing.

Thank you in advance for your usual assistance in these matters.

Sincerely,



John T. "Tim" Leadbeater

/dmw

Enclosures

H:\TAX\JTL\Amer Prop Prof\SOS ltr 06.04.04 LLC Arts.doc

**ARTICLES OF ORGANIZATION
OF
AMERICAN PROPERTY PROTECTION LLC**

The undersigned, pursuant to the provisions of Chapter 608, Florida Statutes, provides the following information for the purpose of forming a Limited Liability Company under the laws of the State of Florida.

**ARTICLE 1.
Name**

The name of the Limited Liability Company is **AMERICAN PROPERTY PROTECTION LLC.**

**ARTICLE 2.
Address**

The street and mailing address of the place of business in Florida is:

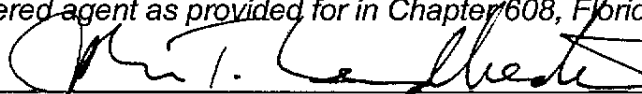
c/o Nilam Patel, Managing Member
45633 Highway 27
Davenport, FL 33897-4546

**ARTICLE 3.
Registered Agent and Registered Office**

The name and Florida street address of the initial registered agent in Florida for the Limited Liability Company are:

John T. "Tim" Leadbeater
227 South Calhoun Street
Tallahassee, Florida 32301-1805

Having been named as registered agent and as the person to accept service of process for the above-stated limited liability company at the place designated in these Articles, 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, Florida Statutes.


John T. "Tim" Leadbeater, Registered Agent

FILED
04 JUN -4 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLE 4.
Management**

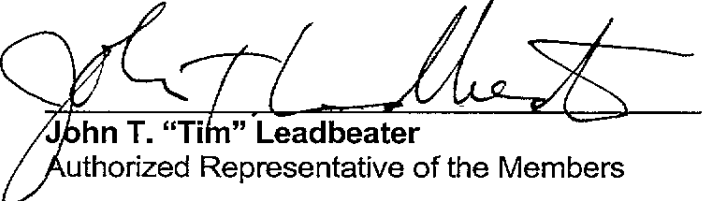
The name and address of each Manager or Managing Member are as follows:

Nilam Patel, MGRM

45633 Highway 27
Davenport, Florida 33897-4546

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 4th day of June, 2004.

IN ACCORDANCE WITH SECTION 608.408(3), FLORIDA STATUTES, THE EXECUTION OF THIS DOCUMENT CONSTITUTES AN AFFIRMATION UNDER PENALTIES OF PERJURY THAT THE FACTS STATED HEREIN ARE TRUE.


John T. "Tim" Leadbeater
Authorized Representative of the Members