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(Ad	ldress)	
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(Cit	ty/State/Zip/Phone #	(*)
PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	
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MILITER OF CORPORATIONS

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TRANSMITTAL LETTER

Division of Corporations		
	ments I, LLC	
(Name of Lir	mited Liability Company)	
The enclosed Articles of Organization and fee(s) a	are submitted for filing.	
Please return all correspon	ndence concerning this matter to the following:	
Alex Vug	(Name of Person)	
	(Name of Person)	-
	(Firm/Company)	 11051
877 Eagle Paint St. Augustine	Drive Wot	-28051
8	(Address)	
St. Augustine	e, A 32092	
v (c	Jity/State and Zip Code)	
For further information concerning this matter, plea	ase cal]:	
Alex Vugman	at (904) 614-8989 (Area Code & Daytime Telephone Number)	0,
(Name of Person)	(Area Code & Daytime Telephone Number)	04.132
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		0 2
		04 JUL
STREET ADDRESS:	MAILING ADDRESS:	3 95

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Wision of conforations



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 21, 2004

ALEX VUGMAN 877 EAGLE PAINT DRIVE ST. AUGUSTINE, FL 32092

SUBJECT: APV INVESTMENTS I, LLC

Ref. Number: W04000028051

We have received your document for APV INVESTMENTS I, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

In Article IV, please list the name of the manager.

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.

Lee Rivers Document Specialist

Letter Number: 704A00046257

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	 ,
APV Investments.	L, LLC
ARTICLE II - Address: The mailing address and street address of the principal	office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
877 Eagle Point Drive	877 Eagle Paint Deive
877 Eagle Point Drive St. Augustine, FL 32092	St. Augustine, FL32292
	30
ARTICLE III - Registered Agent, Registered Office The name and the Florida street address of the registered	
Alex VugmAn	るい。
: VALLE	
B77 Eagle Poir Florida street address (P.O. Box No.	it DRIVE
Florida street address (P.O. Box N	OT acceptable)
St. Aug ustine FL City, State, and Zip	ORIDA 32092
heen named as registered agent and to accept service of t	process for the above stated limited liability

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, Florida Statutes.

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

The name and address of each Manage	The second paper of Tappanton and the second		
Title: "MGR" = Manager	Name and Address:		
"MGRM" = Managing Member	Alex Vugnian		
MGR	877 Eagle Point Drive	_	
	Alex Vugman 877 Eagle Point Drive 34 Augustine FL 32092	<u>-</u>	
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(Use attachment if necessary)		04 JUL 30 AM 9:	ASIO CONTRACTOR
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NOTE: An additional article must h	e added if an effective date is requested.	0	SZ
	/	3	유년 유년
REQUIRED SIGNATURE:		9:16	AT LOSS
Signature of a member of an	authorized representative of a member.		
	8.408(3), Florida Statutes, the execution affirmation under the penalties of perjury true.)		
Alex Vugen	ani		
Typed or p	orinted name of signee		

Filing Fees:
\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)