

L05000009193

Florida Department of State
Division of Corporations
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DIVISION OF CORPORATION

To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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LIMITED LIABILITY COMPANY

apex investments, llc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

HD5000023701

APEX INVESTMENTS, LLC
ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

APEX INVESTMENTS, 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:

APEX INVESTMENTS, LLC

2560 JARDIN MANOR

WESTON, FL 33327

APEX INVESTMENTS, LLC

2560 JARDIN MANOR

WESTON, FL 33327

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

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

ARTURO E. MATTA

Name

2560 JARDIN MANOR

Florida street address (P.O. Box NOT acceptable)

WESTON

FL 33327

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..

ⓧ Arturo Matta

Registered Agent's Signature

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Page 1 of 2

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TOTAL P.03

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APEX INVESTMENTS, LLC

ARTICLE IV- Manager(s) or Managing Member(s):

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

ARTURO E. MATTA
2566 JARDIN MANOR
WESTON, FL 33327

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested

REQUIRED SIGNATURE:

(x) Arturo Matta

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

(In accordance with section 803.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

ARTURO E. MATTA

Typed or printed name of signer

* EFFECTIVE DATE : 1/27/05

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TALLAHASSEE, FLORIDA

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