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2010 OF CORPORATIONS
DIVISION OF CORPORATIONS

TRANSMITTAL LETTER

Division of Co			
SUBJECT: Big	Applle Holdings F (Name of Limite	lorida I, LLC d Liability Company)	
The enclosed Articles o	f Organization and fee(s) are s		
Please return all corresp	ondence concerning this matte	er to the following:	
Will	Liam.TPētergeim	Name of Person)	,
	(I	Name of Ferson)	
Big Apple	Holdings, Inc.		-
	(Firm/Company)	200
280 We	kiva Springs Rd.	Ste. 205	MAY 2
		(Address)	SSE
I	ongwood, Florida	32779	2005 MAY 20 PM 2: 11 2005 MAY 20 PM 2: 11 DIVINITION SEE, FLORID A
		/State and Zip Code)	MONS -
For further information	concerning this matter, please	call:	
William T. Pe	terseim	at <u>866</u> 843-27	75
(Name	of Person)	(Area Code & Daytime Te	elephone Number)
Enclosed is a check fo	r the following amount:		
□ \$125.00 Filing Fee	S \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	ET ADDRESS:	MAILING ADDRESS:	
Divisio	ration Section on of Corporations	Registration Section Division of Corporations	
409 E.	Gaines Street assee, Florida 32399	P.O. Box 6327 Tallahassee, F	7

ROBERT S. HENDRIX, ESQ.

ATTORNEY AT LAW 6065 Frantz Road, Suite 103 Dublin, OH 43017

Phone 1-800-433-7926 or (614) 791-2622 FAX: (614) 791-2621

Email: hxlaw@rrohio.com

May 17, 2005

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

Re: Big Apple Holdings Florida I, LLC

Please register the attached Limited Liability Company. If you have any questions, please call my paralegal, Mary Ritchie.

Sincerely,

Robert S. Hendriy

Enclosure

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Big Apple Holdings Florida I. I	JLC
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
280 Wekiva Springs Rd. Ste. 205 Longwood, F1. 32779	280 Wekiva Springs Rd. Ste. 205 Longwood, Florida 32779
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the re William T. Peterse Name 280 Wekiva Springs	gistered agent are: FILE Rd. Ste. 205
Florida street addr	ress (P.O. Box NOT acceptable)
City, State, and Having been named as registered agent and to a	nd 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

(CONTINUED)

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	William T. Peterseim 837 Monticello Ct. Cape Coral, Florida	33904
A		THE RESERVE TO SERVE
	3 - 2 - 3 - 2 - 3 - 2 - 3 - 2 - 3 - 3 -	SEE
(Use attachment if necessary)		7
NOTE: An additional article must be	added if an effective date is re	quested.
REQUIRED SIGNATURE:		
	an authorized representative of a n	
	n 608.408(3), Florida Statutes, the exerts an affirmation under the penalties of a are true.)	
William T. Pet	erseim	

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee