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HARRY M. HOBBS, P. A.

ATTORNEYS AT LAW 3719 SWANN AVENUE TAMPA, FLORIDA 33609

HARRY M. HOBBS (1925-2001) ROBERT S. HOBBS WALTER O. HOBBS*

(813) 879-8333 FAX (813) 877-5426 E-mail: rhobbs@harrymhobbspa.com

* BOARD CERTIFIED CIVIL TRIAL LAWYER

October 28, 2005

VIA FEDERAL EXPRESS AIRBILL #7912 5363 5118

Division of Corporations Attn: Registration Section 2661 Executive Center Circle Clifton Building Tallahassee, Florida 32301

RE:

D. Aprile Properties, LLC R. Aprile Properties, LLC J. Aprile Properties, LLC Our File No. 05-085

Greetings:

Pursuant to the above referenced matter, please find enclosed three (3) fully executed Articles of Organization to be filed along with our checks in the amount of \$125.00 each.

Thank you for your assistance in this matter and if you should have any questions, pleae contact my office.

Sincerely,

HARRYM, HOBBS, P.A.

Teresa Jimenez, CLA

Paralegal for Robert S. Hobbs, Esquire

/tmj enclosures

COVER LETTER

TO:

Registration Section

Division of Corporations	
SUBJECT: D. Aprile Properties, LLC (Name of Limite	d Liability Company)
Name attend by Locales on illilor	5 per Mr. Holobs
The enclosed Articles of Organization and fee(s) are s	•
Please return all correspondence concerning this matter	er to the following:
Robert S. Hobbs, Esquire	
Q	Name of Person)
Harry M. Hobbs, P.A.	
	Firm/Company)
3719 Swann Avenue	
	(Address)
Tampa, FL 33609	
(City.	State and Zip Code)
For further information concerning this matter, please	call:
Robert S. Hobbs, Esquire	at (813) 879-8333
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\(\bigcup \)\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

D. Aprile Properties, LLC			
(Must end with the words "Limited Liability Company, "Lin & Dame at Much on 11 105 by LSE! ARTICLE II - Address:	llers per Mr. Hobbs	·	
The mailing address and street address of the	e principal office of the Limited Liab	ility Compan	y is:
Principal Office Address:	Mailing Address:		
11004 Theresa Arbor Drive	11004 Theresa Arbor Drive		
Temple Terrace, FL 33617	Temple Terrace, FL 33617	-	
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.)	red Office, & Registered Agent's Segistered Agent. You must designate an individual	ignature: al or another	
The name and the Florida street address of the	e registered agent are:	= 6) in
Robert S. Hobbs, Esqui	ire	ANG S	
Nan	me		⊣ ယေ ာာ⊳
3719 Swann Avenue		<u>ئۇ</u> يېزى	
Florida street	address (P.O. Box NOT acceptable)	四.	
Tampa	_{FL} 33609	Kesse FLORIDA	- :.
City, State	e, and Zip	Ş⊓i	-J

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 (REQUIRED)

(CONTINUED) Page 1 of 2

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	Daniel T. Aprile	_
	11004 Theresa Arbor Drive	
	Temple Terrace, FL 33617	
		•

		•
(Use attachment if necessary)		
	n the date of filing: (OPTIO state of filing:	
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REQUIRED SIGNATURE:	ALLA	후 = ==
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REQUIRED SIGNATURE:	ALASSES	OT 31 F
REQUIRED SIGNATURE:	ember or an authorized representative of a member.	CT 31 FY 1
REQUIRED SIGNATURE: Signature of a fine (In accordance wi of this document	ember or an authorized representative of a member. ith section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury ated herein are true.)	05 DCT 31 F" 1:27

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