(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:

L. SELLERS

SEP: - 9 2009

EXAMINER



Office Use Only



300159472833

08/19/09--01012--010 **125.00

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Apache Auto Sales LLC
Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Desiree Moore
Name of Person
Firm/Company
1608 HWY 90 A
Address
Chipley Florida 32428 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Desiree' Move at (850) 1038 - 5384 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status}\$\$155.00 Filing Fee & \$\ \text{Certified Copy}\$\$ (additional copy is enclosed) \$\ \text{Certified Copy}\$\$ (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 20, 2009

DESIREE MOORE 1608 HWY 90 A CHIPLEY, FL 32428

SUBJECT: APACHE AUTO SALES LLC

Ref. Number: W09000037749

We have received your document for APACHE AUTO SALES LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is P05000080065.

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) 245-6967.

Leslie Sellers Regulatory Specialist II

D' ' CO ' DO DON GOOD MILL DI 'L GOOT

Letter Number: 409A00028299

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

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

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address:

ARTICLE I - Name:

ARTICLE II - Address:

Principal Office Address:

The name of the Limited Liability Company is:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent are:	
Desirce' Modre Name	
Florida street address (P.O. Box NOT acceptable)	
Chipey FL 30428 City, State, and Zip	
Having been named as registered agent and to accept service of process for the above stated limite 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 a 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	all

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE	IV-	Manager(s) or	Managing	Member($[\mathbf{S}]$):
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The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:						
"MGRM" = Managing Member							
MGR	Desirce Moore 1608 Any 90 Chipley F132428						
MGRM	Louise Adams Nob 8 Hwy 90 Chioley, FL 33438						
MGRM	Carmen Adams 1608 HWY 90 Chipley F132428						
(Use attachment if necessary)							
ARTICLE V: Effective date, if other than the date of filing: (OPTIONAL) If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)							
REQUIRED SIGNATURE:							
Signature of a member or appropriate of a member.							
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)							
Typed or printed name of signee							
Filing Fees:	of printed mains of signed						
\$125.00 Filing Fee for Articles of Organization and Designation							

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

SECRETARY OF STATE