Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000037175 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : HAILE, SHAW & PFAFFENBERGER, P.A.

Account Number: 076326003550 Phone

: (561)627-8100

Fax Number

: (561)622-7603

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

FLORIDA/FOREIGN LIMITED LIABILITY CO.

LEED AP, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

J. BRYAN

FEB 1 9 2009

EXAMINER

COVER LETTER

TO:	Registration of	n Section Corporations						
SUBJI	ECT:		LEEC	AP, L	LC.			
		Name of Lim	ited Liab	bility Com	pany			
The cn	closed Articles	of Organization and fee(s) ar	e submit	ted for fili	ng.			
Please	return all corre	espondence concerning this ma	atter to th	e followir	ng:			
		Drennen			., Esquire			
			Name	of Person				
		Haile, Sha			erger, P.A.		Fin.	=
			Firm/C	Сопралу			CS ECS	# .
		660 U.S. H			Third Floor	r	HAETE	EB 18
			Ad	dress			SET	8 3
		North P	alm Be	each, Fi	33408		710	35
•				and Zip Cod			- CF	_ æ
_		dren	nen@v	whitmire	.com			-
		E-mail address: (to be used	for future	en launna e	ort notificatio	n)		
Por furt	her informatio	n concerning this matter, pleas	e call:					
D		Vhitmire, Jr., Esquire	at ()	627-8100		
	Nam	e of Person		Area Cod	o & Daytime	Felephone Number		
Enclos	ed is a check	for the following amount:						
\$125.0	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Ce:	5.00 Filir rtified Co ditional cop	_	S160.00 Fill Certificate Certified Conditional conditi	of Status opy	&
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Registrati Division Clifton B 2661 Exc	ourier Addre ion Section of Corporati duilding ecutive Cente ice, FL 3230	ons r Circle		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compar	ny is:		
	AP, LLC Liability Company," "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of t	the principal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
1532 Venice Avenue Et. Walton Beach, FL 32547	1532 Venice Avenue Et Walton Beach, FL 32547		
business entity with an active Florida registration.) The name and the Florida street address of Drennen L. W	hitmire, Jr., Esquire		
·	vay One, Third Floor		
	(P.O. Box NOT acceptable)		
North Palm Beac	h, FL		
City, St	ate, and Zip		
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet accept the obligations of my position as	d to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of all te performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, F.S		

Page 1 of 2 (CONTINUED)

"MGR" = Manager "MGRM" ≈ Managin	<u>Name and Address:</u> g Member
MGR	George Edward Keller, Jr.
	1532 Venice Avenue
	Et. Walton Beach, FL 32547
	AS CONTRACTOR AND ASS
	五日
	mo
	To The state of th
TT44 (
Use attachment if ne	essary)
TO V. Defention date	fother than the data of filings (ODTION)
fective date is listed, to days after the date of REQUIRED SIGNA	runk: The
fective date is listed, to days after the date of REQUIRED SIGNA	ture of a member of an authorized representative of a member.
fective date is listed, it days after the date of REQUIRED SIGNA Sign (In a of ti	the date must be specific and cannot be more than five business date filing.) FURE:
fective date is listed, it days after the date of REQUIRED SIGNA Sign (In a of ti	ture of a member of an authorized representative of a member. coordance with section 608.408(3), Florida Statutes, the execution is document constitutes an affirmation under the penaltics of perjury