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2010 JUL -8 AM 19: 11 SECRETARY OF STATE

C. LEWIS

JUL _ 9 2010

EXAMINER

NOTICE UNDER FICTITIOUS NAME STATUTE

TO WHOM IT MAY CONCERN:
Notice is hereby given that the undersigned pursuant to the "Fictitious Name Statute", Chapter 865.09, Florida Statutes, will register with the Division of Corporations, Department of State, State of Florida upon receipt of proof of the publication of this notice, the fictitious name, to-wit:

Appy Camper Studios LLC under which (I am) (we are) engaged in business at 2505 Delaney Ave., Orlando, FL 32806. That the (party) (parties) interested in said business enterprise is as follows:

Timothy Jay Steinouer Ethan Long

Dated at Orlando, Orange County, Florida, June 25, 2010.

COR 1076083

7/4/2010

AD for Orlando Sentinel 7-4-10

COVER LETTER

TO: Registration Division of C			
,	F		
SUBJECT: Appy C	Camper Studios LLC.	31111111 G	
	Name of Limit	ted Liability Company	
The enclosed Articles of	of Organization and fee(s) are	submitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
Timothy Jay	/ Steinouer		
		Name of Person	
Appy Camp	er Studios LLC.		
		Firm/Company	
2505 Delane	ey Ave.		
		Address	
Orlando, FL	32806		
 	Cit	y/State and Zip Code	
tsteinouer@			
	E-mail address: (to be used	for future annual report notification)	
For further information	concerning this matter, please	e call:	
Timothy Jay Steir		at (407) 421-1594	
Name	of Person	Area Code & Daytime Telep	hone Number
Enclosed is a check for	or the following amount:		
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	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 Ci Tallahassee, FL 32301	ircle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compan	y is:
Appy Camper Studios LLC. (Must end with the words "Limited	Liability Company, "L.L.C.," or "L.L.C.,")
ARTICLE II - Address: The mailing address and street address of the	ne principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Appy Camper Studios LLC.	Appy Camper Studios LLC.
2505 Delaney Ave.	2505 Delaney Ave.
Orlando, FL 32806	Orlando, FL 32806
business entity with an active Florida registration.) The name and the Florida street address of Timothy Jay Steinou	-i. 😭
	fame PET
2505 Delaney Ave. Florida stree	
Orlando, FL 32806	FL y, State, and Zip
Cit	y, State, and Zip
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complete	d to accept service of process for the above stated limited I in this certificate, I hereby accept the appointment as eacity. I further agree to comply with the provisions of all the performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, F.S
- / ret	2 Spran
Registered Agent's S	ignature (REQUIRED)

(CONTINUED)
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FILED

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

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

SECRETARY OF STATE TALLAHASSEE, FLORIDA

	Name and Address:
"MGR" = Manager "MGRM" = Managing Membe	er -
MGR	Timothy Jay Steinouer
	2505 Delaney Ave.
	Orlando, FL 32806
MGR	Ethan Long
	28 E. Vanderbilt St.
	Orlando, FL 32804
	
(Use attachment if necessary)	
TICLE V: Effective date, if other th	nan the date of filing: (OPTIONAL) nust be specific and cannot be more than five business days prior
FICLE V: Effective date, if other the effective date is listed, the date responding after the date of filing.) REQUIRED SIGNATURE:	
FICLE V: Effective date, if other the neffective date is listed, the date responding after the date of filing.) REQUIRED SIGNATURE: Signature of a (In accordance of this document)	nust be specific and cannot be more than five business days prior
FICLE V: Effective date, if other the neffective date is listed, the date responding after the date of filing.) REQUIRED SIGNATURE: Signature of a (In accordance of this document)	member or an authorized representative of a member. with section 608.408(3), Florida Statutes, the execution at constitutes an affirmation under the penalties of perjury lated herein are true.)

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)