3052201440 LAZARUS 02 9/2011 16:46 rivision of C rporations

Division of Corporations **Electronic Filing Cover Sheet**

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.

(((H11000035511 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from the page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

Exom:

: LAZARUS CORPORATE FILING SERVICE, INC. Account Name

Account Number: I20000000019 : (305)552-5973 Phone

: (305)220-1440 Fax Number

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

Email Address:

FLORIDA LIMITED LIABILITY CO. AP GROUP INVESTMENTS USA LLC

Certificate of Status

1

Certified Copy

Ô

Page Count

03

Estimated Charge

\$130.00

G. MCLEOD

Electronic Filing Menu

Corporate Filing Menu

FEB 10 Help

EXAMINER

H110000355

ARTICLE I - Name: The name of the Limited Liability Company	ny is:
AP GROUP INVESTM	NENTS USA LLC
(Must end with the words "Limited	d Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of Principal Office Address:	the principal office of the Limited Liability Company is: Mailing Address:
Frincipal Office Address:	Maning Auditess:
1125 SW 5th Street	1125 SW 5th Street
Unit #8	Unit #8
Miami, Florida 33030	Miami, Florida 33030
	stered Office, & Registered Agent's Signature: a Registered Agent. You must designate an individual or anather:
The name and the Florida street address of ALEXANDER P	ENATE Name SET 1
The name and the Florida street address of ALEXANDER P	ENATE Name Street #8

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..

(CONTINUED) Page 1 of 2 H11000035511 ARTICLE IV- Manager(s) or Managing Member(s):

H11000035511

		Name and Address:
MGR" = N		
MUKM" =	Managing Member	
MGRM	•	ALEXANDER PENATE
	· · · · · · · · · · · · · · · · · · ·	1125 SW 5th Street #8
		Mlami, Florida 33030
	,	
		·
		
	1	
Use attach	ment if necessary)	
EV: Effe ective dat days after	ective date, if other the	an the date of filing: <u>02-09-2011</u> (OPTION ust be specific and cannot be more than five business da
EV: Effe ective dat days after	ective date, if other the e is listed, the date m the date of filing.)	an the date of filing:02-09-2011 (OPTION nust be specific and cannot be more than five business da
EV: Effe ective dat days after	ective date, if other the e is listed, the date m the date of filing.)	an the date of filing: 02-09-2011 (OPTION nust be specific and cannot be more than five business da
EV: Effe ective dat days after	ective date, if other the e is listed, the date in the date of filing.) ED SIGNATURE:	nust be specific and cannot be more than five business da
EV: Effe ective dat days after	ective date, if other the is listed, the date in the date of filing.) ED SIGNATURE: Signature of a recordance of this documents.	ust be specific and cannot be more than five business de
EV: Effe ective dat days after	ective date, if other the is listed, the date in the date of filing.) ED SIGNATURE: Signature of a recordance of this documents.	Lexander Concate 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

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

Page 2 of 2

H11000035511