

L12000103788

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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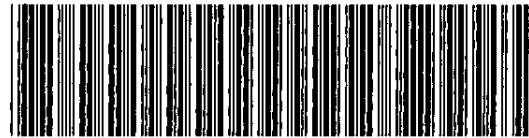
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FEB 18 2013

J. BRYAN

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Apex Financial Solutions, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ruchi Attal

Name of Person

Apex Financial Solutions, LLC

Firm/Company

14499 N. Dale Mabry Hwy, Ste. #185

Address

Tampa, FL 33618

City/State and Zip Code

ruchi@apexcfo.com

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Ruchi Attal

Name of Person

at (201) 951-8320

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 5, 2013

RUCHI ATTAL  
APEX FINANCIAL SOLUTIONS, LLC  
14499 N. DALE MABRY HWY, STE #185  
TAMPA, FL 33618

SUBJECT: APEX FINANCIAL SOLUTIONS, LLC  
Ref. Number: L12000103788

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2013 FEB 15 PM 4:07  
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TALLAHASSEE, FLORIDA

We have received your document for APEX FINANCIAL SOLUTIONS, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6051.

Joey Bryan  
Regulatory Specialist II

Letter Number: 313A00002791

**RESTATED AND AMENDED  
ARTICLES OF ORGANIZATION OF  
APEX FINANCIAL SOLUTIONS, LLC**

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a limited liability company under the laws of the State of Florida sets forth the following:

**ARTICLE I: NAME**

The Name of the Limited Liability Company is: Apex Financial Solutions

**ARTICLE II: ADDRESS**

The Mailing Address of the Principal Office is: 14499 N. Dale Mabry Hwy  
Suite 185  
Tampa, Florida 33618

The Street Address of the Principal Office is: 14499 N. Dale Mabry Hwy  
Suite 185  
Tampa, Florida 33618

**ARTICLE III: DURATION**

The duration of the Limited Liability Company shall be perpetual.

**ARTICLE IV: MANAGEMENT**

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager managed company. The name and address of the initial Manager is as follows:

<u>Title</u>	<u>Name and Address</u>
Manager (MGR)	Ruchi Attal 4629 Rue Bordeaux Lutz, Florida 33558

**ARTICLE V: ADMISSION OF ADDITIONAL MEMBERS**

Members may admit additional members at any time pursuant to a majority vote of the Members. The additional Members must agree to be bound by the Operating Agreement.

**ARTICLE VI: MEMBERS RIGHTS TO CONTINUE BUSINESS**

Upon the death, retirement, resignation, expulsion, bankruptcy, dissolution of a member or upon the occurrence of any other event which terminates the membership of a member in the limited liability company, the business of the limited liability company shall not be continued and the limited liability company shall be dissolved unless there is obtained the consent of the remaining members of the limited liability company.

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TALLAHASSEE FLORIDA  
SECRETARY OF STATE

## ARTICLE VII: REGISTERED AGENT

The name and address of the initial Registered Agent in Florida for the Limited Liability Company is: Ruchi J. Attal  
14499 North Dale Mabry Hwy.  
Suite #185  
Tampa, Florida 33618

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 obligation of my position as Registered Agent.

Ruchi J. Attal  
Ruchi Attal, Registered Agent

2/11/13  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Executed at Tampa, Florida on the 11<sup>th</sup> day of Feb 2013.

Ruchi J. Attal  
Ruchi Attal, Manager

(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.)