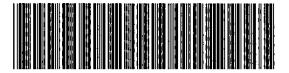
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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: A & P Oil & Gas, LLC		
Name of Lin	nited Liability Company	
The enclosed Articles of Organization and fee(s) ar	re submitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Richard Abramowitz		
	Name of Person	
A & P Oil & Gas, LLC	Pi (G	
	Firm/Company	
7800 West Oalkand Park Blvd., Su	ite 101	
	Address	
Sunrise, Florida 33351		
C	ity/State and Zip Code	
charlene@abrpom.com E-mail address: (to be used	d for future annual report notificat	tion)
For further information concerning this matter, plea	ase call:	
Richard Abramowitz at (§	954) <u>572-7200</u> Area Code Daytime Tele	ephone Number
Name 011 Cl3011	Area Code Daytime Ten	ephone (valide)
Enclosed is a check for the following amount:		
□ \$125.00 Filing Fee	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address	Street/Courier Addr	ess
Registration Section	Registration Section	
Division of Corporations P.O. Box 6327	Division of Corporati Clifton Building	IOIIS
Tallahassee, FL 32314	2661 Executive Center	er Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:		
A & P Oil & Gas, LLC.		
(Must end with the words "Limit	ed Liability Company, "L.L.C.," or "I	LLC.")
ARTICLE II - Address: The mailing address and street address of the principal	office of the Limited Liability Comp	any is:
Principal Office Address:	Mailing Address:	
7800 West Oakland Park Blvd. Suite 101	7800 West Oakland Park Blv Suite 101	rd.
Sunrise, FL 33351	Sunrise, FL 33351	
(The Limited Liability Company cannot serve as its ovanother business entity with an active Florida registration of the register and the Florida street address of the register.)	tion.)	ातार ताः ।।।पारावायाताः छा
Richard Abramowitz		
Nar	ne	
7800 West Oakland Park B Florida street address (P.O. B		
Sunrise	FL 33351	
City	Zip	
Having been named as registered agent and to accept the place designated in this certificate, I hereby acc capacity. I further agree to comply with the provision of my duties, and I am familiar with and accept the Ch	cept the appointment as registered ager ns of all statutes relating to the proper	nt and agree to act in this and complete performance
Registered Agent's Sig	gnature (REQUIRED)	. 4
(CONTIN	NUED)	<i>></i>
Page 1	of2	
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		-
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AMBR" = Authorized Member MGR" = Manager MGR	
_	
MGR	
	Richard Abramowitz
	7800 West Oakland Park Blvd.
	Sunrise, FL 33351
A1400	
AMBR	Howard L. Pomerantz
	7800 West Oakland Park Blvd. Sunrise, FL 33351
	Sumse, FL 33331
	,, , , , , , , , , , , , , , , , , , ,
	nd cannot be more than five business days prior to or
Filing.) VI: Other provisions, if any.	nd cannot be more than five business days prior to or .
f filing.)	27 - 17
f filing.)	Topen H
Tilling.) E. VI: Other provisions, if any. REQUIRED SIGNATURE:	Lacet T
Tilling.) E. VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of	or an authorized representative of a member.
REQUIRED SIGNATURE: Signature of a member of (In accordance with section 605.0203)	or an authorized representative of a member. (1) (b), Florida Statutes, the execution of this document
REOUIRED SIGNATURE: Signature of a member of a member of a constitutes an affirmation under the policy of the constitutes an affirmation under the policy of the constitutes an affirmation under the policy of the constitutes and affirmation under the constitutes and affirmation under the constitutes and affirmation under the policy of the constitutes and affirmation under the constitutes and affirmation u	or an authorized representative of a member. (1) (b), Florida Statutes, the execution of this document enalties of perjury that the facts stated herein are true.
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Signature of a member of a mem	or an authorized representative of a member. (1) (b), Florida Statutes, the execution of this document enalties of perjury that the facts stated herein are true. submitted in a document to the Department of State
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Signature of a member of a mem	or an authorized representative of a member. (1) (b), Florida Statutes, the execution of this document enalties of perjury that the facts stated herein are true. submitted in a document to the Department of State ovided for in s.817.155, F.S.) d or printed name of signee Filing Fees:

ARTICLE IV-