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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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## COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	American Patriots Apparel LLC
300,13	Name of Limited Liability Company
The end	closed Articles of Organization and fee(s) are submitted for filing.
Please r	eturn all correspondence concerning this matter to the following:
	Steven John Baldassari
	Name of Person
	American Patriots Apparel LLC
	Firm/Company
	3377 S Saint Lucie Dr.
	Address
	Casselberry, FL 32707
	City/State and Zip Code
	apfgac@gmail.com
	E-mail address: (to be used for future annual report notification)
For furth	er information concerning this matter, please call:
	Steven John Baldassari 978 580-4438
	Name of Person Area Code Daytime Telephone Number
Enclose	ed is a check for the following amount:
<b>\$</b> 125.00	O Filing Fee \$\ \text{Certificate of Status} \ \text{S155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \ \text{Certified Copy (additional copy is enclosed)} \ Cert
	No. 111 A J.J

#### **Mailing Address**

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### Street Address

New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

America	an Patriots Apparel LLC				
<del></del>	(Must end with the words "Limited Lia	bility Company	, "L.L.C.," or "LLC.")		
ARTICLE II - Ad The mailing addres	dress: s and street address of the principal office	e of the Limited	Liability Company is:		
	Principal Office Address:		Mailing Addr	ress:	
Americ	an Patriots Apparel LLC	Ame	erican Patriots Apparel	LLC	
1 11110110		_			
	Saint Lucie Dr.	3377	7 S Saint Lucie Dr.	_	_
3377 S Cassell ARTICLE III - Re (The Limited Liabi	Saint Lucie Dr.  Derry, FL 32707  Egistered Agent, Registered Office, & Relity Company cannot serve as its own Registry with an active Florida registration.)	Case Registered Ager	selberry, FL 32707 nt's Signature:	dividual or	
3377 S Cassell  ARTICLE III - Re (The Limited Liabi another business en	egistered Agent, Registered Office, & Registered Sommers Company Cannot Serve as its own Registered Office,	Case Registered Ager gistered Agent.	selberry, FL 32707 nt's Signature:	dividual or	
3377 S Cassell  ARTICLE III - Re (The Limited Liabi another business en	registered Agent, Registered Office, & Registered Agent, Registered Office, & Registered Office, & Registered as its own Registry with an active Florida registration.)  Torida street address of the registered agent	Case  Registered Agent. '  gistered Agent. '  ent are:	selberry, FL 32707 nt's Signature:	dividual or	
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3377 S Cassell  ARTICLE III - Re (The Limited Liabi another business en	rgistered Agent, Registered Office, & Relity Company cannot serve as its own Registry with an active Florida registration.) Florida street address of the registered age  Steven John Baldassa Na  3377 S Saint Lucie Dr.	Cass Registered Ager gistered Agent. ' ent are: ri ame	selberry, FL 32707  It's Signature: You must designate an in-	dividual or	

ıc dIam familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

(CONTINUED)

Page 1 of 2

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Steven John Baldassari
	3377 S Saint Lucie Dr.
	Casselberry, FL 32707
	OC
	<del></del>
	· <u></u>
<del> </del>	
<del></del>	
(Use attachment if necessary)	
EV. Effective data if other than the	date of filing: September 28, 2018 (OPTIONAL)
ective date is listed the date must b	e specific and cannot be more than five business days prior to or 90 da
of filing.)	
the date inserted in this block does r	not meet the applicable statutory filing requirements, this date will not be
nent's effective date on the Departm	
•	
E VI: Other provisions, if any.	
· · · · · · · · · · · · · · · · · · ·	

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Steven John Baldassari

Typed or printed name of signee

#### 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)