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A. Kirby for Lou Meyer
 Requestor's Name
PO Box 38533
 Address
T L H FL 32315 904 531-7950
 City/State/Zip Phone #

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 ****285.00 ****285.00
 Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Applegate Services LC
 (Corporation Name) (Document #)
2. _____
 (Corporation Name) (Document #)
3. _____
 (Corporation Name) (Document #)
4. _____
 (Corporation Name) (Document #)

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 97 JAN -2 PM 12:03
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

- ☒ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☒ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

RECEIVED
 97 JAN -2 AM 11:59
 DIVISION OF CORPORATION

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials <u>RL</u>	<u>1/2/97</u>
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ARTICLES OF ORGANIZATION FOR FLORIDA
LIMITED LIABILITY COMPANY

ARTICLES I - Name

The name of the Limited Liability Company is:

Applegate Services, LC

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ARTICLES II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

3800 S. John Young Pkwy.
Suite B
Orlando, FL 32839

ARTICLES III - Duration

The period of duration for the Limited Liability Company shall be:

Thirty years

ARTICLES IV - Management

(Check and complete the appropriate statement)

☒ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as managers(s) is/are:

Charles Allen 3800 S. John Young Pkwy, Ste B, Orlando FL 32839

☐ The Limited Liability Company is to be managed by the members and the names(s) and address(es) of the managing member(s) is/are:

ARTICLES V - Admission of Additional Members:

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be:

The remaining members have the right to admit additional members with the unanimous vote of the remaining members.

ARTICLES VI - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

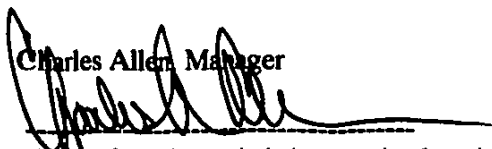
The remaining members have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company.

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of
Applegate Services, LC deposes and says:

- 1) the above named limited liability company has at least two members
- 2) the total amount of cash contributed by the member(s) is \$ 200.00
- 3) if any, the agreed value of property other than cash contributed by members(s) is \$0.00.
A description of the property is attached and made a part hereto.
- 4) the total amount of cash or property anticipated to be contributed by member(s) is
\$ 200.00. This total includes amounts from 2 and 3 above.

Charles Allen, Manager


Signature of a member or authorized representative of a member.
(In accordance with section 608.402(3), Florida Statutes, the execution of this affidavit
constitutes as attestation under the penalties of perjury that the facts stated herein are true.

FILING FEE: \$250 for Articles of Organization and Affidavit

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA
STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS
THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

Applegate Services, LC

2. The name and address of the registered agent and office is:

Charles Allen

Name

3800 S. John Young Pkwy, Ste. B

(P.O. Box not acceptable)

Orlando, FL 32839

City/State/Zip

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.

Charles Allen

(Signature)

12/30/96

(Date)

FILING FEE: \$35.00 for Designation of Registered Agent

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