2000	UNIFURM BUS	INESS NEPU	טן וחי	PN)		<u>;</u>		
DOCUMENT # L9800000881 1. Entity Name					FILED			
APPLE INY, L.C.					00 JAN 26 PM 3: 41			
1	NE BLVD PENTHOUSE 810	Mailing Address 12000 BISCAYNE BLVD PENTHOUSE 810		SECRETARY OF STATE TALLAHASSEE, FLORIDA				
Miami FL 3318	81-2742	MIAMI FL 33181-2727				ieni eeni eeni eeni eeni f	LOUSE COURS BOLES (BIOLE)	L181 (383 4 86)
Principal Place of Business 3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE				
City & State		City & State		4. FEI Number)848439		olied For	
Zip	Country	Zip	Country		5. Certificate of Status		\$5.00 Addi	
	6. Name and Address of Current	Registered Agent	<u> </u>		7. Name and Address	of New Register	<u>-</u>	_
KUPERSTEIN, STANLEY H ONE S.E. 3RD AVENUE, 28TH FLOOR MIAMI FL 33131				reet Address (P.O. Box Number is Not A	NE B	ELAN LVD, #8 FL ZBC99	2)0
8. The above	named entity submits this statement to	and title if applicable. (NOT	AS K. E: Registered Agen	TRE t signature required	ed agent, or both, in the S LAND (when reinstating)	State of Florida.	3-00 ME	<u></u>
9.	MANAGING MEMB	ERS/MEMBERS	10.		AC	DITIONS/CHAN	GES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR IRELAND, THOMAS K 12000 BISCAYNE BLVD., PENTHOUSE 810 MIAMI FL 33181-2742		TITLE NAME STREET ADI CITY- 81- ZI	1	800	-02/01/00	□ Change 8238 01062 	007
VITLE NAME STREET ADDRESS CITY-87-21F		☐ Delate	TITLE NAME STREET ADS CITY- 81-21	ŀ		~~~~~ ~ JU.	☐ Change	*Accinto
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Oeleta	TITLE WAME STREET ADI CITY-ST-ZI	1			Change	Addition
TITLE MAME STREET ADDRESS CITY-ST-ZIP		☐ Delirto	TITLE NAME STREET ADD	1			☐ Changa	Addition
TITLE WAME STREET ADDRESS GITY-ST-ZIP		☐ Beleto	TITLE NAME STREET ADI	l l			Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE MAME STREET ADI	DRESS			☐ Change	Addition
11. I hereby of	Lertify that the information supplied with on this report is true and accurate and ability company or the receiver or truste	l that my signature shall have	r the exemption the same legal	on stated in Se al effect as if m uired by Chapt	nade under oath; that I ar ter 608, Florida Statutes.	n a managing me	ember or managei	of the
SIGNAT	URE: SIGNATURE AND TYPED OR PRI	THE REQUI	MEMBER OF MA	M A.S . 7	1-13 K. IRELAN Date	<u> 302</u>	5-891-68 Daytime Phone #	306