2008 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Jan 02, 2008
Secretary of State

DOCUMENT# M05000001614

Entity Name: AP CAPITAL PARTNERS, LLC

Current Principal Place of Business:

6000 METROWEST BLVD
SUITE 208
ORLANDO, FL 32835 US

New Principal Place of Business:

Current Mailing Address:

6000 METROWEST BLVD
SUITE 208
ORLANDO, FL 32835 US

New Mailing Address:

FEI Number: 88-0519689 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

A.G.C. CO.
200 S. ORANGE AVENUE, SUITE 2300
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: KENNETH C. WRIGHT, VICE PRESIDENT

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: ALPHONSE, FRANTZ
Address: 6000 METRWOEST BLVD, SUITE 208
City-St-Zip: ORLANDO, FL 32835 US

Title: MGRM ( ) Delete
Name: POWELL, RICHARD
Address: 6000 METROWEST BLVD, SUITE 208
City-St-Zip: ORLANDO, FL 32835 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: ALPHONSE, FRANTZ
Address: 6000 METROWEST BLVD, SUITE 208
City-St-Zip: ORLANDO, FL 32835 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: FRANTZ ALPHONSE MGRM 01/02/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date