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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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CLERK OF STATE
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OCT 30

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Apollo Investment & Real Estate Holdings LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Christopher S. Nicotra

Name of Person

Apollo Investment & Real Estate Holdings LLC

Firm/Company

P.O. BOX 320958

Address

Fairfield, CT 06825

City/State and Zip Code

Apollorealestate11c@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christopher Nicotra

Name of Contact Person

at (203)

Area Code

996-0625

Daytime Telephone Number

MAILING ADDRESS:

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

STREET ADDRESS:

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

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☒ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

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2018 OCT 24 PM 12:13
CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. APollo Investment & Real Estate Holdings LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Connecticut
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 82-4524358
(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 196 Pine Creek Ave.
(Street Address of Principal Office)

6. P.O. Box 320958
(Mailing Address)

Fairfield, CT
06824

Fairfield CT 06825

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name:

Christopher S. Nicotra

Office Address:

1030 Lewis Cove

Delray Beach, FL

(City)

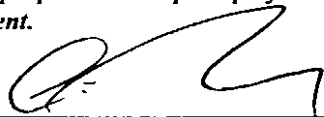
, Florida

(Zip code)

33483

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(Registered agent's signature)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:

Name and Address:

☐ Manager

Name: _____

☒ Member

Address: _____

☐ Authorized

Person

☐ Other _____

☐ Other _____

☐ Manager

Name: _____

☐ Member

Address: _____

☐ Authorized

Person

☐ Other _____

☐ Other _____

☐ Manager

Name: _____

☐ Member

Address: _____

☐ Authorized

Person

☐ Other _____

☐ Other _____

Title or Capacity:

Name and Address:

☐ Manager

Name: _____

☐ Member

Address: _____

☐ Authorized

Person

☐ Other _____

☐ Other _____

☐ Manager

Name: _____

☐ Member

Address: _____

☐ Authorized

Person

☐ Other _____

☐ Other _____

☐ Manager

Name: _____

☐ Member

Address: _____

☐ Authorized

Person

☐ Other _____

☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. 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.

Signature of an authorized person

Christopher S. Nicotro

Typed or printed name of signer

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2018 OCT 24 PM 12:13
CLERK OF STATE
TALLAHASSEE, FL 32399

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof,
DO HEREBY CERTIFY, that articles of organization for

APOLLO INVESTMENT & REAL ESTATE HOLDINGS LLC

a domestic limited liability company, were filed in this office on February 22, 2018. The following is a
list of all documents filed in this office:

Filing Type: -----	File Date/Time: -----	Effective Date/Time: -----
CERTIFICATE OF ORGANIZATION	February 22, 2018 07:35 PM	February 22, 2018 07:35 PM
REPORT (2019)	February 22, 2019 10:35 AM	

Articles of dissolution have not been filed, and so far as indicated by the records of this office such
limited liability company is in existence.



Secretary of the State

Date Issued: October 21, 2019