P21000012134

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(City/State/Zip/Phone #)					
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(Business Entity Name)					
(Document Number)					
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DATE:

2/11/2021

NAME: APIP INC

TYPE OF FILING: ARTICLES

COST:

-155.00

78.75

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

Obshie Hodg

COVER LETTER

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

SUBJECT:	APIP INC.			
	(PROPOSED CORPORA	ATE NAME – MUST INCL	UDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:	
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate o Status PPY REQUIRED	
FROM:	Jennifer Swantek Name (Printed or typed)			
	823 Congress Ave	e, Ste P-4		
	Address			
	Austin, TX 78701			
	City, State & Zip			
	512-499-8999			
	Daytime Telephone number			
	tony@aperryhomes.com			
	E-mail address: (to be used for future annual report notification)			

NOTE: Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

2021 FEB 11 AM 10: 51

he name of the corpor	ration shall be: APIP Inc.	SECRETARY	()F S
TICLE II PRIN	VCIPAL OFFICE Principal street address	TALLAHAS	SEE, I
651 E. 4th St., Suit	e 200	Mailing address, if different is:	
Chattanooga, TN 3	7403		 -
TICLE III BUO			
TICLE III PURI e purpose for which	OSE the corporation is organized is:	80V lawful nurnose	
		any lawful purpose	
		· · · · · · · · · · · · · · · · · · ·	
			_
			_
RTICLEIV SHAL	<u>(ES</u>		
e number of states o	f stock is: 1		
	44 05540555		
TICLE V UNITE	AL OFFICERS AND/OR DIRECTO	<u>PRS</u>	
Name and Titl	e: Anthony Perry, President	Name and Title:	
Address			
71001033		Address:	_
	Chattanooga, TN 37403		
			
Name and Title	::	Name and Title:	
Address		Address:	
			
			
Name and Title	·	Name and Title:	
	-		
Address		Address:	

Name and	Title:	Name and Title:	
Address		Address:	
	•		
	 		
	<u>EGISTERED AGENT</u> <u>rida street address</u> (P.O. Box NOT accept	able) of the registered agent is:	
Name:	Anthony Perry		
Address:	36 S. Bounty Lane		
	Key Largo, FL 33037		~
			TEC TO
ARTICLE VII I	<u>NCORPORATOR</u>		ALL ALL
The name and add	dress of the Incorporator is:		EB II A
Name:	Anthony Perry		ASS A
Address:	36 S. Boumty Lane		FFS.
	Key Largo, FL 33037		FILED 2001 FEB 11 MH 10: 51 SECRETARY OF STATE SECRETARY OF STATE
	EFFECTIVE DATE:		
	ther than the date of filing: the is listed, the date must be specific and	(OPTIONAL) I cannot be more than five days prior or 90 day	vs after the
filing.)	,		, • • • • • • • • • • • • • • • • • • •
	inserted in this block does not meet the app fective date on the Department of State's re	olicable statutory filing requirements, this date wi ecords.	ll not be listed as
		rocess for the above stated corporation at the place registered agent and agree to act in this capacity	e designated in this
Λ	F (1112-	2/1	1/21
	Required Signature/Registered Ago	ent	Date
I submit this docu document to the D	ment and affirm that the facts stated here epartment of Style constitutes a third degree	ein are true. I am aware that the false informatice felony as provided for in s.817.155, F.S.	on submitted in a
Required Signature	/Incorporator	Date	'/