

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000084479

**Entity Name:** SCH SUPPLY LLC

**Current Principal Place of Business:**

1860 N PINE ISLAND RD  
SUITE 109  
PLANTATION, FL 33322

**Current Mailing Address:**

1860 N PINE ISLAND RD  
SUITE 109  
PLANTATION, FL 33322 US

**FEI Number:** 47-4021462

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ISABEL, ISIS  
1860 N PINE ISLAND RD  
SUITE 109  
PLANTATION, FL 33322 US

*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:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name CHIARIERI MANSUR, CARLOS ANTONIO  
Address 19400 TURNBERRY WAY APT 1012  
City-State-Zip: AVENTURA FL 33180

Title MGR  
Name SERAFIN, DIEGO ANDRES  
Address 19400 TURNBERRY WAY APT 1012  
City-State-Zip: AVENTURA FL 33180

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DIEGO ANDRES SERAFIN

MGR

04/01/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date