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July 26, 2001

L01000013359

Department of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

**RE: Articles of Organization  
SEM Management Ltd.**

To Whom It May Concern:

Enclosed herewith for filing please find the following document for the above referenced corporation:

1. Articles of Organization for a Limited Liability Company.
2. Check in the amount of \$125.00 for the filing fee.

800004506798--2  
-07/30/01--01081--001

\*\*\*\*125.00 \*\*\*\*125.00

Thank you for your attention to this matter.

Very truly yours,

  
Kevin R. Keogh

KRK/m  
Enclosure

FILED  
2001 AUG 10 AM 10:54  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

August 1, 2001

KEVIN R. KEOGH  
CONWAY MARKEN ET AL  
30195 CHAGRIN BLVD SUITE 300  
CLEVELAND, OH 44124

SUBJECT: SEM MANAGEMENT LTD.  
Ref. Number: W01000017787

We have received your document for SEM MANAGEMENT LTD. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "L.C." or "L.L.C."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Shawn Logan  
Document Specialist

Letter Number: 401A00044510

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**SEM MANAGEMENT L.L.C.**

**ARTICLE II- Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

**4661 VIA ROMA BONITA SPRINGS, FLORIDA 34134**

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

The name and the Florida street address of the registered agent are:

**SHELDON E. MILLER**

Name

**4661 VIA ROMA**

Florida street address (P.O. Box **NOT** acceptable)

**BONITA SPRINGS FL 34134**

City, State, and Zip

*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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.*

*Sheldon Miller*

Registered Agent's Signature

**Article IV - Management (Check box if applicable.)**



The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

*Sheldon Miller*

Signature of a member or an authorized representative of a member:

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Sheldon E. Miller

Typed or printed name of signee

**Filing Fees:**

**\$100.00 Filing Fee for Articles of Organization**

**\$ 25.00 Designation of Registered Agent**

**\$ 30.00 Certified Copy (Optional)**

**\$ 5.00 Certificate of Status (Optional)**

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TALLAHASSEE, FLORIDA