

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 28, 2006 8:00 am
Secretary of State

03-28-2006 90015 020 ****50.00

DOCUMENT # L 03000003899
1. Entity Name

SCHORIG HOLDING LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2110 N. OCEAN BLVD APT. 2303		3. Mailing Address	
Suite, Apt. #, etc		Suite, Apt. #, etc.	
City & State FORT LAUDERDALE, FL		City & State	
Zip 33305	Country	Zip	Country

4. FEI Number
90-0085611

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

7. Name and Address of Current Registered Agent

Name LAYNE VEREBAY	
Street Address (P.O. Box Number is Not Acceptable) 888 SE 3RD AVE	
SUITE 400	
City FORT LAUDERDALE	Zip Code FL 33316

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

FEE IS \$50.00
Make Check Payable to Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBER WILLIAM SCHOOLMAN 2110 N. OCEAN BLVD.APT.2303 FORT LAUDERDALE, FL 33305
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEMBER MARCIA RIGGI 3202 NE 183RD ST. APT.1705 AVENTURA, FL 33160
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

William Schoolman

3/17/06

954-565-7734

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083B (12/02)