

LO5000001425

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

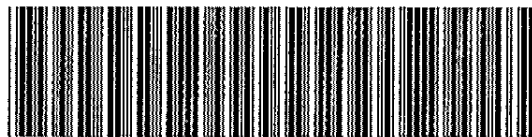
Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

BK

Office Use Only



100043887721

FILED

05 JAN -5 PM 4:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

05 JAN -5 11:24:1

DEPT. OF REVENUE
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 124933 5490A

AUTHORIZATION : Patricia *Patricia*

COST LIMIT : \$ 155.00

ORDER DATE : January 5, 2005

ORDER TIME : 2:13 PM

ORDER NO. : 124933-005

CUSTOMER NO: 5490A

CUSTOMER: Ms. Kathleen Kennedy
Mastriana & Christiansen

Suite 200
1500 North Federal Highway
Fort Lauderdale, FL 33304

FILED
05 JAN -5 PM 4:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: SCHUBERT DEVELOPMENT, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 2956

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
Schubert Development, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
Schubert Development, LLC
1500 North Federal Highway
Suite 200
Fort Lauderdale, Florida 33304

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

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

F. Ronald Mastriana, Esq.

Name

1500 North Federal Highway Suite 200

Florida street address (P.O. Box NOT acceptable)
Fort Lauderdale FL 33304

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..

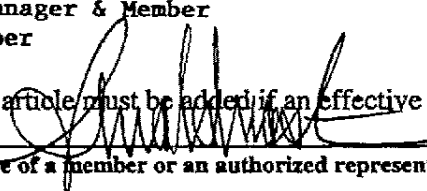

Registered Agent's Signature

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.

1. F. Ronald Mastriana - Manager & Member
2. Dennis Bellehumeur - Member

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


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.)

F. Ronald Mastriana, Esq.

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)

FILED
05 JAN -5 PM 4:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA