

W5000075439

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

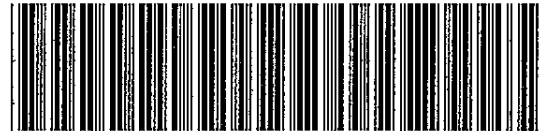
Special Instructions to Filing Officer:

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Office Use Only



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M. HODGES

65 JUL 29 11 06 AM '05

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Schumacher & Chamberlain Commerce Management, LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joseph Anthony Rodriguez  
(Name of Person)

Schumacher & Chamberlain Commerce Management, LLC  
(Firm/Company)

2229 N. Commerce Parkway, Suite 200  
(Address)

Weston, FL 33326  
(City/State and Zip Code)

For further information concerning this matter, please call:

Joseph Anthony Rodriguez at ( 954 ) 389-0918  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input checked="" type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|--|---|---|

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

Schumacher & Chamberlain Commerce Management, LLC

### ARTICLE II - Address:

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

#### Principal Office Address:

2229 N. Commerce Parkway, Suite 200  
Weston, FL 33326

#### Mailing Address:

2229 N. Commerce Parkway, Suite 200  
Weston, FL 33326

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

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

Joseph Anthony Rodriguez

Name

2229 N. Commerce Parkway, Suite 200

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

Weston, FL 33326

FL

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

(CONTINUED)

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Joseph Anthony Rodriguez

2229 N. Commerce Parkway, Suite 200

Weston, FL 33326

MGRM

Joseph Paragone

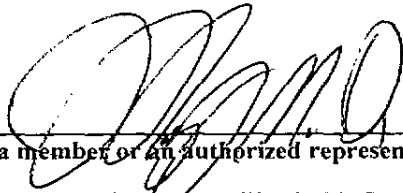
3200 S. Congress Ave., #206

Boynton Beach, FL 33426

(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**



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.)

Joseph Anthony Rodriguez

Typed or printed name of signee

**Filing Fees:**

\$125.00 Filing Fee for Articles of Organization and Designation  
of Registered Agent

\$ 30.00 Certified Copy (Optional)

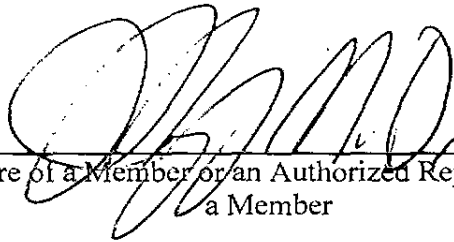
\$ 5.00 Certificate of Status (Optional)

**=Addendum=**

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

**NAME OF ENTITY: Schumacher & Chamberlain Commerce Management,  
L.L.C.**

**ARTICLE V—Effective Date: July 25, 2005**

A handwritten signature in black ink, appearing to read 'J. Rodriguez', is written over a horizontal line.

Signature of a Member or an Authorized Representative of  
a Member

Joseph Anthony Rodriguez

Printed Name