# L07000012957

| (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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REPARTACL OF SIME
OF LORPORATIONS
TALL ANASSEE, FLORIDA

AMII: 26

OTFEB-5 PM 1: 36

### CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

| S Quad Properties, LLC   | OT FEB -5 PM 1:36  |
|--|--|
| Signature  | Art of Inc. File LTD Partnership File Foreign Corp. File L.C. File Fictitious Name File Trade/Service Mark Merger File Art. of Amend. File RA Resignation Dissolution / Withdrawal Annual Report / Reinstatement Cert. Copy Photo Copy Certificate of Good Standing Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Owner Search Vehicle Search Vehicle Search |
| Requested by:    Date   Date | Driving Record  UCC 1 or 3 File  UCC 11 Search  UCC 11 Retrieval   |
| Walk-In Will Pick Up   | Courier  |

## ARTICLES OF ORGANIZATION FOR S QUAD PROPERTIES, L.L.C. A FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - NAME**

The name of the Limited Liability Company is S QUAD PROPERTIES, LLC.

#### **ARTICLE II - ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is **201 Fisherman's Way, Jupiter, Florida 33477**.

## ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE

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

Name

<u>Address</u>

Steven Schnell, M.D.

201 Fisherman's Way Jupiter, Florida 33477

OTER S PH 1:36

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 an accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Steven Schnell, M.D., Registered Agent

#### **ARTICLE IV - MANAGEMENT**

[ X ] The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company. [check if applicable]

Steven Schnell, M.D., Managing Member

Steven Schuster, M.D., Managing Member

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