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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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D. BRUCE

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EXAMINER

COVER LETTER

Division of Corporations		
SUBJECT: Kaufman & Schavey	/ LLC	
	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:	
Larry Schavey		
	Name of Person	
Kaufman & Schavey LL	.C	
	Firm/Company	
24827 Lakemont Cove L	_N #103	
	Address	
Danita Caringo El 24124	E.C.	ā
Bonita Springs, FL 34134	City/State and Zip Code	-
larryschavey@hotmail.com	AS	سب. سب ا
	ised for future annual report notification)	<u>-⇔</u> [
For further information concerning this matter, p	olease call:	مبرج حنب
Larry Schavey	at (239) 405-5151 SEE	至 :: 12
Name of Person	at (239) 405-5151 Gr	~
Enclosed is a check for the following amoun	nt:	
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status	<u> </u>	s &
Mailing Address Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Clifton Building	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is	5.	
Kaufman & Schavey LLC	61 LC 2 - 41 LC 2	
(Must end with the words "Limited Lial	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability Company:	is:
Principal Office Address:	Mailing Address:	
24827 Lakemont Cove LN #103	656 Lake Drive Clear Lake	
Bonita Springs, FL 34134	Fremont, IN 46737	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.) The name and the Florida street address of the Larry Schavey Nam 24827 Lakemon	e registered agent are:	
Florida street a	address (P.O. Box NOT acceptable)	
Bonita Springs	FL 34134	
· City, S	State, and Zip	
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete p	o accept service of process for the above stated limited this certificate, I hereby accept the appointment as sity. I further agree to comply with the provisions of performance of my duties, and I am familiar with an eignered agent as provided for in Chapter 608, F.S	all

Page 1 of 2

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

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

Title:	Name and Address:		
"MGR" = Manager			
"MGRM" = Managing Member			
MGRM	Larry Schavey .		
	24827 Lakemont Cove Ln #103		
	Bonita Springs, FL 34134		
MODM	-		
MGRM	Bernard L. Kaufman		
	656 Lake Drive Clear Lake		
	Fremont, IN 46737		
<u></u>			
(I be attack mont if account)			
(Use attachment if necessary)			
ARTICLE V. Effective date if other than the	date of filing: (OPTION	(AL)	
	e specific and cannot be more than five business da		
to or 90 days after the date of filing.)		V - 1 - · · ·	
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	_ ^	, v4	
<u>REQUIRED</u> SIGNATURE:		_ <u>[[] </u>	
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Si J OW		$\mathcal{L}(\mathcal{L}) \subset \mathcal{L}(\mathcal{L})$	
	r or an authorized representative of a member.	me 3	m
(In accordance with section 608	.408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true.	FS T	
constitutes an affirmation under	r the penalties of perjury that the facts stated herein are true, nation submitted in a document to the Department of State	LONID,	U
constitutes a third degree felony	as provided for in s.817.155, F.S.)	DE CO	
Larry Schavey	•		
	ped 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)