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Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

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13 FEB 19 AM 8:00
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
CHASE MANAGEMENT, LLC**

Certificate of Status	0
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February 19, 2013

FLORIDA DEPARTMENT OF STATE
Division of CorporationsCHASE MANAGEMENT, LLC
5100 TOWN CENTER CIRCLE, #300
BOCA RATON, FL 33486SUBJECT: CHASE MANAGEMENT, LLC
REF: W13000009965FILED
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TALLAHASSEE, FLORIDA

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The existing entity with a similar name is CHASE MANAGEMENT LLC -- Doc. Number M99000001948.

Please return your document, along with a copy of this letter, within 60 days of the filing date. If your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call 850-245-6051.

Buck Kohr
Regulatory Specialist IIFAX Aud. #: H13000036164
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P.O BOX 6327 - Tallahassee, Florida 32314

413000036164

ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I

The Name of the Limited Liability Company shall be:

CHASE EDUCATION MANAGEMENT, LLC

ARTICLE II

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the Act.

ARTICLE III

The mailing address and street address of the principal office of the limited liability company is:

5100 TOWN CENTER CIRCLE, #300
BOCA RATON, FL 33486

ARTICLE IV

The Name of The Managing Member (s) shall be:

MGRM
GLOBAL EDUCATION OPTIONS LLC
5100 TOWN CENTER CIRCLE, #300
BOCA RATON, FL 33486

ARTICLE V

The name and Florida street address of the registered agent shall be:

PHILIP MORGAMAN
5100 TOWN CENTER CIRCLE, #300
BOCA RATON, FL 33486

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TALLAHASSEE, FLORIDA

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**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED
OFFICE/MEMBER/REPRESENTATIVE**

CHASE EDUCATION MANAGEMENT, LLC

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.



Signature of Registered Agent



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)

PHILIP MORGAMAN

Typed or printed name signee

H13000036164.