

L140000074086

(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:

Office Use Only



700259089097

04/21/14--01036--021 \*\*125.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
16 APR 21 PM 1:58

MAY 07 2014  
J. HARRIS

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: JG SCHROEDER ENTERPRISES, 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:

GORDON G. SCHROEDER

Name of Person

Firm/Company

1538 HICKORY RIDGE DR

Address

FRUITLAND PARK, FL 34731

City/State and Zip Code

JGSCHROEDER4@COMCAST.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GORDON G. SCHROEDER at ( 352 ) 348-0007  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |   |   |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input 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) |
|---|---|---|---|

**Mailing Address**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street/Courier Address**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 23, 2014

GORDON G SCHROEDER  
1538 HICKORY RIDGE DR  
FRUITLAND PARK, FL 34731

SUBJECT: JG SCHROEDER ENTERPRISES, LLC  
Ref. Number: W14000025792

We have received your document for JG SCHROEDER ENTERPRISES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please include the name of the manager.,

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

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

Jenna D Harris  
Regulatory Specialist II

Letter Number: 814A00008687

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 APR 21 PM 1:59

**Affidavit to Release Limit Liability name for New Articles of Organization**

**STATE OF FLORIDA**

**COUNTY OF LAKE**

1. Introduction. Gordon G Schroeder, being duly sworn, deposes and says:


2. Description of Deponent. I am the Manager of JG Schroeder Enterprises, LLC, a limited liability company organized and existing under the laws of Florida and qualified to do business under the laws of Florida, with its principal offices at: 1538 Hickory Ridge Dr Fruitland Park, FL 34731. I make this affidavit solely as an agent of the above referenced limited liability company and in no other capacity.

3. Revoking Privilege and Release of Name. I do now hereby revoke any former use of limited liability company name and do now transfer the limited liability name: JG Schroeder Enterprises, LLC. to be filed and used with the new articles of organization now dated April 14, 2014 having full right, power, and authority to transfer such name.

4. Inducement. This affidavit is made for the specific purpose of transferring the limited liability company name as stated from any/all previous articles of organization dated prior to the new articles now dated April 14, 2014.

  
Signature — Gordon G. Schroeder

Be it known that on the 14th day of April, 2014 before me appeared Gordon G Schroeder who is personally known to me.

  
Notary - State of Florida



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 APR 21 PM 1:58

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:

JG SCHROEDER ENTERPRISES, LLC

(Must end with the words "Limited Liability 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:**1538 HICKORY RIDGE DR  
FRUITLAND PARK, FL 34731**Mailing Address:**1538 HICKORY RIDGE DR  
FRUITLAND PARK, FL 34731**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

GORDON G. SCHROEDER

Name

1538 HICKORY RIDGE DRFlorida street address (P.O. Box NOT acceptable)FRUITLAND PARK

City

FL 34731

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 605, F.S.*



Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
16 APR 21 PM 1:59

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR**Name and Address:**Gordon G. Schroeder  
1538 HICKORY RIDGE DR  
FRUITLAND PARK, FL 34731

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 04/14/2014 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**ARTICLE VI:** Other provisions, if any.**REQUIRED SIGNATURE:**

Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.125, F.S.)

GORDON G. SCHROEDER

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)