Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H140002439673)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : CORP USA

Account Number : 072450003255

Phone

: (305)634-3694

Fax Number

: (305)633-9696

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

Address:

# FLORIDA LIMITED LIABILITY CO. R & E SCHUMAN, LLC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

ps://efile.sunbiz.org/scripts/efilcovr.exe

A2U 9A00

9696889908

10/17/2014

99:91 0102/21/01



H140000439107

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF:

#### ARTICLE I - NAME

The name of the Limited Liability Company is:

R & E SCHUMAN, LLC.

#### ARTICLE II - ADDRESS:

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

#### 775 NW 75<sup>TH</sup> STREET FORT LAUDERDALE, FL 33309

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

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

ESTEFANIA SCHUMAN 1460 5 OCEAN BLVD, APT, 1003 POMPANO BEACH, FL 33062

Having been named as registered agent and to accept service of process at for the above stated corporation at the place designated in these Articles of Incorporation, 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.

Registered agents Signature (REQUIRED)

Prepared by: Firmo Maldonado c/o Regiones Unidas 8010 W. Sample Road Coral Springs, FL 33065 Pisone (954) 344-3555 TARY OF STATE

EFFECTIVE DATE 0/17/2014



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

The name and address of each Manager and managing Members is as follows:

MGR: ESTEFANIA SCHUMAN 1460 S OCEAN BLVD. APT. 1003 POMPANO BEACH, FL 33062

ARTICLE IV - Effective Date

OCTOBER 17, 2014

ESTEFANIA SCHUMAN / Manager

14 OCT 17 AH:8:27
SECRETARY OF STATE

11/15/2014 18:85 3056336666

PAGE 03/03

CORP USA