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TRANSMITTAL LETTER

TO: Registration Se Division of Co			•	
SUBJECT: The Leve	rage Fund, LLC			_
	(Name of Limite	d Liability Company)		-
The enclosed Articles of	f Organization and fee(s) are s	ubmitted for filing.		
Please return all corresp	ondence concerning this matte	er to the following:		
Fred Eps	stein			
<u></u>		Name of Person)		
				- Ti ro C
	(Firm/Company)		SECULIATION OF STATE
2695 NW 41	Street			
		(Address)		79
				154 153 164
Boca	Raton, Florida 33434			
	(City)	State and Zip Code)		
For further information	concerning this matter, please	call:		
Fred Epstein		at (561) 994-7381		
(Name	of Person)	(Area Code & Daytime To	elephone Number)	_
Enclosed is a check for	or the following amount:			
□ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Certificate of Sta Certified Copy (additional copy is en	tus &
STREET ADDRESS:		MAILING A Registration S		
Registration Section		Kegisuanon s		

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

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

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
The Leverage Fund, LLC		
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company	is:
Principal Office Address:	Mailing Address:	
2695 NW 41 Street	The Leverage Fund, LLC	
Boca Raton FL 33434	2695 NW 41 Street	
	Boca Raton, Florida 33434	
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the r	-8-2	05 AUG 17
Name		1
2695 NW 41 Street Florida street add	dress (P.O. Box NOT acceptable)	AM IO: 2L
Boca Raton, Florida 33434 City, State, a	FL and 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 608, F.S..

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
MGRM	Fred Epstein		
	2695 NW 41 Street		
	Boca Raton, Florida 33434		
			
-			
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			5 AUG
•			<u> </u>
(Use attachment if necessary)			7 #
NOTE: An additional article must b	e added if an effective date is requested.	E STAI	AM IO: 24
REQUIRED SIGNATURE:		SH.	42
- Lu	(Caren	4,	•
Signature of a member	or an authorized representative of a member.		
(In accordance with section of this document constitute that the facts stated her	on 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perjury ein are true.)		
Fred Epstein			
Туре	d 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)