

JAN-08-1900 02:56

LOS000108639

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

**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.**

(((H05000259728 3)))

**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)205-0383

From:  
Account Name : ACCOUNTING & BEYOND  
Account Number : I19990000223  
Phone : (813)998-9800  
Fax Number : (813)935-9982

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

05 NOV - 8 AM 9:53

FILED

RECEIVED

05 NOV - 8 PM 1:10

DIVISION OF CORPORATION

**LIMITED LIABILITY COMPANY**

**L&B INVESTMENTS, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

Thomas NOV - 9 21

Electronic Filing Menu

Corporate Filing

Public Access Help

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

The name of the Limited Liability Company is:

L&B INVESTMENTS, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

**ARTICLE II - Address:**

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

**Principal Office Address:**

2515 KATHLEEN STREET  
TAMPA, FL 33607

**Mailing Address:**

2515 KATHLEEN STREET  
TAMPA, FL 33607

**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:

BENITO PEREZ

Name

2515 KATHLEEN STREET

Florida street address (P.O. Box NOT acceptable)

TAMPA, FL 33607

City, State, 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.*

Benito Perez

Registered Agent's Signature (REQUIRED)

05 NOV - 8 AM 9:53  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(CONTINUED)

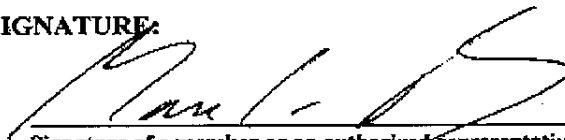
Page 1 of 2

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

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

**Title:****"MGR" = Manager****"MGRM" = Managing Member****Name and Address:****MGR****BENITO PEREZ****2515 KATHLEEN STREET****TAMPA, FL 33607****MGRM****LAZARA PEREZ****2515 KATHLEEN STREET****TAMPA, FL 33607****MBR****MARIA C. PEREZ****2515 KATHLEEN STREET****TAMPA, FL 33607**

(Use attachment if necessary)

**ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_ (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.)****REQUIRED SIGNATURE:**

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.)

**MARIA C. PEREZ**

Typed or printed name of signer

**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)**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

05 NOV - 8 AM 9:53

FILED