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(R	equestor's Name)	
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T. HAMPTON
FEB - 9 2010
EXAMINER

COVER LETTER

Division of	Corporations		
SUBJECT:	Logic Trading Company LLC		
	Name of Limi	ted Liability Company	
The enclosed Article	es of Organization and fee(s) are	submitted for filing.	
Please return all cor	respondence concerning this mat	tter to the following:	
	Α	rthur Friedman	
		Name of Person	
-	Logic To	rading Company LLC	
		Firm/Company	
	4401	Water Oak Bend	
		Address	
	Lee	esburg, FL 34748	
	Ci	ity/State and Zip Code	
	F-mail address: (to be used	d52@comcast.net for future annual report notification)	
For further informat	ion concerning this matter, pleas	•	
Ar	thur Friedman	at (352) 787-7865	
Ni	ame of Person	Area Code & Daytime Telephone Number	
Enclosed is a chec	k for the following amount:		
\$125.00 Filing Fe	ce \$\int\\$130.00 \text{ Filing Fee & Certificate of Status}	S155.00 Filing Fee & S160.00 Filing Fee Certified Copy (additional copy is enclosed) Certified Copy (additional copy is en	tus &
	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	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Comp	pany is:
Logic Tradii (Must end with the words "Limi	ng Company LLC ited Liability Company," "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4401 Water Oak Bend Leesburg, FL 34748	
	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another of the registered agent are:
Ati	hur Friedman
	Name
	Water Oak Bend
Florida street addr	ress (P.O. Box <u>NOT</u> acceptable)
Leesburg 34	748 FL 7, State, and Zip
City	, State, and Zip
liability company at the place designate registered agent and agree to act in this statutes relating to the proper and compaccept the obligations of my position	and to accept service of process for the above stated limited ated in this certificate, I hereby accept the appointment as capacity. I further agree to comply with the provisions of all aplete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 608, F.S
Registered-Agen	Signature (REQUIRED)
	FER SHORE

(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:

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGRM	Arthur Friedman
	4401 Water Oak Bend
	Leesburg, FL 34748
·	<u></u>
	
(Use attachment if necessary)	•
ARTICLE V: Effective date, if other than th	e 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:	
	(4)
Signature of a megal	per of an authorized representative of a member.
•	
of this document cor that the facts stated h	section 608.408(3), Florida Statutes, the execution astitutes an affirmation under the penalties of perjury serein are true.)
	Arthur Friedman
	yped or printed name of signee
Filing Fees:	IT.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)