# L15000/88521

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Consideration to Filing Officer				
Special Instructions to Filing Officer:				





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### **COVER LETTER**

	Registration Section Division of Corporations			
SUBJEC	LEVERAGE Business Lending,	LLC		
Name of Limited Liability Company				
The encl	osed Articles of Organization and fee	(s) are submitted	for filing.	
Please re	eturn all correspondence concerning th	is matter to the	following:	
	Marvin Garland			
		Name of	f Person	
	LEVERAGE			
		Firm/Co	ompany	
	3692 COOLIDGE COURT			
		Addı	ress	
	Tallahassee, FL 32311			
	lisa.burroughs.myleverage.com	City/State ar	nd Zip Code	
	E-mail address: (to be	used for future	annual report notification)	
For further	r information concerning this matter, p	olease call:		
	Marvin Garland	850 at (	558-1102	
	Name of Person	Area Code	Daytime Telephone Number	
Enclosed	l is a check for the following amount:			
<b>]</b> \$125.00	Filing Fee \$130.00 Filing Fee Certificate of State	ıs LCertif	00 Filing Fee & \$160.00 Filing Fee, Ged Copy nal copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Address  New Filing Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314		Street Address  New Filing Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301	

## ARTICLES OF ORGANIZATION OF LEVERAGE BUSINESS LENDING, LLC

The undersigned, being authorized to execute and file these Articles of Organization, hereby certifies that:

#### **ARTICLE 1**— Name:

The name of the Limited Liability Company (hereinafter referred to as the "Company") is:

"LEVERAGE Business Lending, LLC"

#### **ARTICLE II** — Address:

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

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3692 Coolidge Court Tallahassee, Florida 32311

#### **ARTICLE III** — Registered Agent:

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

provided for in Chapter 605, Florida Statutes.

Patrick LaPine 3692 Coolidge Court Tallahassee, Florida 32311

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

Patrick LaPine

#### **ARTICLE IV** — Management:

The Company is to be managed by its managers and is, therefore, a manager-managed company. The name and address of the Company's initial managers ("MGR") are:

Keith Hopkins 3692 Coolidge Court Tallahassee, Florida 32311

Lisa Burroughs 3692 Coolidge Court Tallahassee, Florida 32311

Vincent Muratore 6650 E. Brainerd Road Suite 212 Chattanooga, Tennessee, 37421 SEGRETARY OF TAPE
YALLAHASSEE FLORIDA

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IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of the Company and acknowledged them to be my act this 5<sup>th</sup> day of November 2015. 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 Section 817.115, Florida Statutes.

Patrick La Pine

President/CEO

LSCU Service Corporation, Inc.

Filing Fee:

\$100.00 for Articles of Organization

\$25.00 for Designation of Registered Agent

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