

L170000240385

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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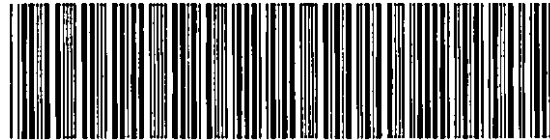
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA 11/20/17

COVER LETTER

TO: New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314
(850) 245-6052

SUBJECT: Lead Investments, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Anthony J. LaBella

Name of Person

25478 Olympia Road

Address

Brooksville, FL 34601

City/ State and Zip

tony.labella2727@icloud.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Edward K. Duller

Name of Person

at (727)

Area Code

808-3556

Daytime telephone number

Enclosed is a check for 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 Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME

The name of the Limited Liability Company is: LEAD INVESTMENTS, LLC

ARTICLE II - ADDRESS

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

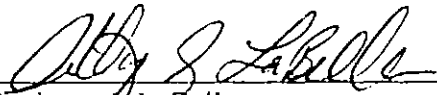
LEAD INVESTMENTS, LLC.
25478 OLYMPIA ROAD
BROOKSVILLE, FL 34601

**ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE**

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

Anthony J. LaBella
25478 Olympia Road
Brooksville, FL 34601

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 605, F.S..



Anthony J. LaBella,
Registered Agent

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TALLAHASSEE, FLORIDA

ARTICLE IV- MANAGERS OR MANAGING MEMBERS

The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u>	<u>Name and Address:</u>
"MGR" = Manager	
"MGMR" = Managing Member	
MGMR	Anthony J. LaBella 25478 Olympia Road Brooksville, FL 34601
MGMR	Edward K. Duller 2434 Raymont Dr. Clearwater, FL 33763

ARTICLE V - EFFECTIVE DATE

The effective date of the company shall be upon filing.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b), Florida Statute.
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 s.817.155, F.S.

Anthony J. LaBella

Typed or printed name of signee

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