L19000084175

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

Office Use Only



800326494878

Containing the second of the second

2019 HAR 25 AH 10: 54
SECRETARY OF STATE.
TALLAHASSEE

1.2 0 1 2019

K Brumbley

COVER LETTER

10:	New Filing Section Division of Corporations	
SUBJE	LB Trade, LLC	
SUBJE		mited Liability Company
The en	nclosed Articles of Organization and fee(s) a	re submitted for filing.
Please	return all correspondence concerning this m	eatter to the following:
	Leslie Weaver	
		Name of Person
	***	Firm/Company
	8709 Driftwood Drive	
	<u></u>	Address
	Tampa, Florida 33615	
	lbtradellc@yahoo.com	City/State and Zip Code
	E-mail address: (to be use	d for future annual report notification)
For furtl	her information concerning this matter, pleas	se call:
	Leslie Weaver 8	728-7701
		Area Code Daytime Telephone Number
Enclos	sed is a check for the following amount:	
\$ 125.6	00 Filing Fee \$\frac{130.00}{Certificate of Status}	\$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address	Street Address
	New Filing Section Division of Corporations P.O. Box 6327	New Filing Section Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

LB Trade, LLC	······································			
(Must co	ntain the words "Limited Li	bility Company, "L.L.	.C.," or "LLC.")	
TICLE II - Address: mailing address and street	address of the principal off	ce of the Limited Liab	ility Company is:	
Princ	Principal Office Address: 8709 Driftwood Drive		Mailing Address: 8709 Driftwood Drive	
8709 Driftwood Drive				
Tampa, Florida 33615	5	Tampa, Flo	vrida 33615	
ELimited Liability Compa- her business entity with a	n active Florida registration et address of the registered a	egistered Agent. You s gent are:	Signature: must designate an individual or	
e Limited Liability Compa- her business entity with a	ny cannot serve as its own R n active Florida registration et address of the registered a Leslie Weaver	egistered Agent. You r		
e Limited Liability Compa- her business entity with a	ny cannot serve as its own R n active Florida registration et address of the registered a Leslie Weaver	egistered Agent. You r gent are: Name	must designate an individual or	
ELimited Liability Compa- her business entity with a	ny cannot serve as its own R n active Florida registration et address of the registered a Leslie Weaver 8709 Driftwood Drive	egistered Agent. You r gent are: Name	must designate an individual or	
e Limited Liability Compa- ther business entity with a	ny cannot serve as its own R n active Florida registration et address of the registered a Leslie Weaver 8709 Driftwood Drive Florida street address of	egistered Agent. You r gent are: Name	must designate an individual or	

(CONTINUED)

FILED
2019 HAR 25 AH 10: 54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager AMBR	Leslie Weaver
	8709 Driftwood Drive
	Tampa, Florida 33615
	Objection Military as
AMBR	Charles Weaver 8709 Driftwood Drive
	Tampa, Florida 33615
	Tampa, Fortida 33013
	
	<u></u>
he date of filing.)	late of filing: March 24, 20/9 (OPTIONAL) specific and cannot be more than five business days prior to or 90 days after of meet the applicable statutory filing requirements, this date will not be listed as ent of State's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	i Wear
Signature of a	member or an authorized representative of a member.
	ecuted in accordance with section 605.0203 (1) (b), Florida Statutes. also information submitted in a document to the Department of State
	gree felony as provided for in s.817.155, F.S.
Leslie Weaver	
COSIG VICETO	Typed 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)