# L210000 75075

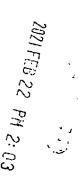
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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# COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Let's Trade, LLC.  Name of Lii	nited Liability Company	
The enclosed Articles of Organization and fee(s) ar	e submitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Marisela Garcia		
	Name of Person	
Let's Trade, LLC.	Firm/Company	
	Pitin/Company	
66 Birchwood Drive	Address	
	Florida 3213 City/State and Zip Code	7
letstradelle@gmail.com	Envisiale and Zip Code	
	l for future annual report notificati	on)
For further information concerning this matter, pleas	se call:	
Marisela Garciaat (	) 9542747538	
Name of Person A	Area Code Daytime Telephon-	e 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)
Mailing Address Navy Filing Socion	Street Address New Filing Section Di	ivision
New Filing Section Division of Corporations P.O. Box 6327	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name
------------------

The name of the Limited Liability Company is:

Let's Trade, LLC.

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

#### ARTICLE II - Address:

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

## **Principal Office Address:**

Mailing Address:

66 Birchwood Drive	P.O. Box 353641	
	Palm Coast, Florida 32135	
Palm Coast, Florida 32137		

# 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:

Marisela Garcia		
	Name	
66 Birchwood Driv	c	
Florida street addre	ess (P.O. Box <u><b>NOT</b></u> ac	eceptable)
Palm Coast	FL_	32137
City	State	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 605, F.S.,

Registered Agent's Signature (REQUIREI

(CONTINUED)

ARTICLE IV-

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

Title:	Name and Address:	
"AMBR" = 7 "MGR" = M	Authorized Member anager	
MGR	Marisela Garcia	
Men	66 Birchwood Drive	<del></del>
	Palm Coast, Florida 32137	
MGR	Avmen Abdallah	
SIGIC	66 Birchwood Drive	
	Palm Coast, Florida 32137	
effective date is ate of filing.)  If the date inse	re date, if other than the date of filing:	or to or 90 days after
CLE VI: Other [	provisions, if any,	
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). Florid: I am aware that any false information submitted in a document to the Department constitutes a third degree felony as provided for in s.817.155, F.S.	i Statutes.
	Marisela Garcia	
	Typed or printed name of signee	
	Filing Food	202

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)

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