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O O'KEEFE MAY 2 5 2021

COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	Libertarian Party of Pinellas County Inc			
SUBJECT:	(PROPOSED CORPO	ORATE NAME – <u>MUST IN</u>	CLUDE SUFFIX)	
Enclosed is an original and	one (1) copy of the Art	icles of Incorporation and	a check for:	
₹\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM: Sonia Becerra Name (Printed or typed)				
3 Greenway Plaza #1320 Address				
	Housto	on, Texas 77046		

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

NOTE: Please provide the original and one copy of the articles.

City, State & Zip

Daytime Telephone number

877-777-0450

filings@swyftfilings.com

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I The name of the o	NAME the corporation shall be: Libertarian Party of Pinellas County Inc					
ARTICLE II	PRINCIPAL OFFICE					
	Principal <u>street</u> address: 417 41st ave NE		Mailing address, if different is:			
	ST PETERSBURG, I	FL 33703				
ARTICLE III The purpose for	PURPOSE which the corporation is org	ganized is:				
FOR CHARITA	ABLE, EDUCATIONAL, R	ELIGIOUS OF	R OTHER PURP	OSES AS RESTRIC	TED BY IRS CODE	,
SECT. 501(C)	(3). ON DISSOLUTION,	THE BOARD	SHALL DISTRIB	UTE ASSETS TO O	NE OR MORE	<u> </u>
_CHARITABLE	PURPOSES TO ENTITI	ES_EXEMPT_	UNDER SECT_50	0.1(C)(3)	ALLA REAL	5
AS PROV	MANNER OF ELECTION VIDED FOR IN THE BYLAN INITIAL OFFICERS AND	AWS		ctors are elected and ap	ppointed:	
Name and Title:	Brett Bittner	President	Name and Title	Camilo Colina	Treasurer	
	417 41st ave NE		Address:	417 41st ave NE		
AddressSt F	St Petersburg, FL 3370	3		St Petersburg, FL 33703		
- Name and Title:	Nate Stevens	Secretary	Name and Title:	Jazmine Herrera	Vice President	
Address 417 41s	417 41st ave NE		- Address:	417 41st ave NE		
	St Petersburg, FL 33703			St Petersburg, FL 33703		
- Name and Title:	Brett Bittner	Director	Name and Title:	Camilo Colina	Director	
	417 41st ave NE		_ Address:	417 41st ave NE		
	St Petersburg, FL 3370	3	_	St Petersburg, Fl	33703	
_			_			

Name and Title:	Jazmine Herrera	Director	Name and Title:		
Address _	417 41st ave NE		Address:		
-	St Petersburg, FL 337	703			
_	<u> </u>				
Name and Title:			Name and Title:		
Address _			Address:	· · · · · · · · · · · · · · · · · · ·	
_					
-	· · · · · · · · · · · · · · · · · · ·				
ARTICLE VI	REGISTERED AGEN				
	ا <u>Porida street address</u> (ا LegalCorp Solut		ceptable) of the registered agent is:		
Name:	3440 W Hollywood	Blvd. Suite 41	 5	差 绝	21
Address:	Hollywood, FL 33	3021		25 25 25 25 25 25 25 25 25 25 25 25 25 2	APR 2
			 -	SSER	ω
	INCORPORATOR ddress of the Incorporate	or is:			
Name:	SONIA BECEI			97 87	, 12: 03
Address:	3 GREENWAY PLAZA #1320				ω .
Address.	HOUSTON, TE	XAS, 77046			
ARTICLE VIII	EFFECTIVE DATE:		(OPTIONAL)		
(If an effective of	f other than the date of fidate is listed, the date i		and cannot be more than five days prior	r or 90 days after	r the filing.)
	e inserted in this block d ctive date on the Depart		e applicable statutory filing requirements, the records.	nis date will not b	e listed as the
Having been na certificate, I am	med as registered agen familiar with an except	t to accept servi the appointmen	ce of process for the above stated corpora t as registered agent and agree to act in this	tion at the place capacity	designated in this
	TRANS	CRABTREE, C	DBO LEGALCORP SOLUTIONS, LLC	4.14.2	160.
	Required Sign	nature of Register	red Agent	Date	
I submit this doc	rument and affirm that th	he facts stated he	rein are true. I am aware that any false info	rmation submitte	d in a document to
the Department			as provided for in s.817.155, F.S.	4.14 2	1031
	Required	Signature of Inc	corporator	Date	<u></u>
		_			