Form LLC-50.1

Secretary of State

Department of Business Services Limited Liability Division 501 S. Second St., Rm. 351 Springfield, IL 62756 217-524-8008 www.ilsos.gov

Illinois Limited Liability Company Act Annual Report

Filing Fee: 75.00
Series Fee, if required:
Penalty: 0.00
Total: 75.00

FILE# 13762791

Due prior to: 09/01/2024

FILED

August 27, 2024

Alexi Giannoulias Secretary of State

1.	Limited Liability Company Name: GAMBLERS HUB LLC						
	Registered Agent: CHARLES JO	HN TROST III					
	841 PLAINFIE	LD NAPERVILLE RD					
	NAPERVILLE	, IL 60540-6466					
2.	State or Country of Organization:	ate or Country of Organization: <u>IL</u>			Date Organized in or Admitted to Illinois: 09/18/2023		
3.	Address of Principal Place of Business:						
	841 PLAINFIELD NAPERVILLE RD NAPERVILLE, IL 60540						
4.	Name and business address of all managers and any member having the authority of manager: TROST III, CHARLES JOHN 841 PLAINFIELD NAPERVILLE RD NAPERVILLE, IL 60540 WERTZ, QUINTIN SCOTT						
		/INFIELD, IL 60190					
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5.	Entity managers affirm their curre	nt existence.					
6.	Changes to the registered agent a	nd/or registered office	must be subm	nitted on Form LLC-1.36/1.37	7.		
7.	I affirm, under penalties of perjury, having authority to sign thereto, that this Annual Report is to the best of my knowledge and belief, true, correct and complete.						
			Dated:	August 27	,2024		
				Month/Day	Year		
	TROST III, CHARLES JOHN		Name				
	MANAGER		Name				
•			Title				
-		applicant is a company or	-th	a Name of Company			