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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

G. MCLEOD
JAN - 8 2010
EXAMINER



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01/07/10 -01020- 011 **125.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
10 JAN - 7 PM 2:34


January 05, 2010

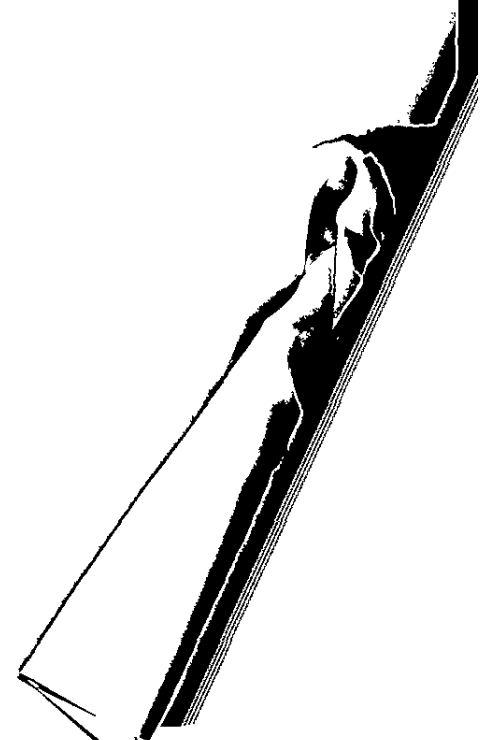
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: Organization and Filing for LLC

Please find enclosed my Articles of Organization and filing fee of \$125.00. I have searched the state registry and find no other company with my name.

Thank you,


Cynthia L. Duff
198 Pinewood Lane
Lake Alfred, Florida 33850
863-662-5205



COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Twin Lakes Appraisal & Consulting, 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:

Cynthia L. Duff

Name of Person

Real Estate Appraisal

Firm/Company

198 Pinewood Lane

Address

Lake Alfred, Florida 33850

City/State and Zip Code

cduff4@tampabay.rr.com

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

For further information concerning this matter, please call:

Cynthia L. Duff

Name of Person

at (863)

662-5205

Area Code & 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)

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Twin Lakes Appraisal & Consulting, LLC

(Must end with 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:

198 Pinewood Lane
Lake Alfred, Florida 33850

198 Pinewood Lane
Lake Alfred, Florida 33850

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:

Cynthia L. Duff

Name

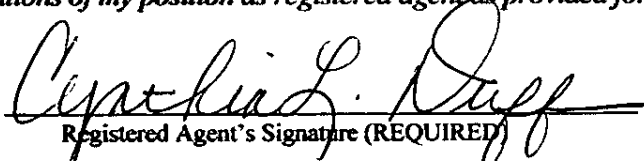
198 Pinewood Lane

Florida street address (P.O. Box NOT acceptable)

Lake Alfred FL 33850 FL

City, State, and 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 608, F.S.


Registered Agent's Signature (REQUIRED)

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SECRETARY OF STATE
DIVISION OF CORPORATION

10 JAN -7 PM 2:34

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Cynthia L. Duff

198 Pinewood Lane

Lake Alfred, Florida 33850

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 01/05/2010. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Cynthia L. Duff

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)