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Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : LAW OFFICE OF DANIEL C. PERRI
Account Number : I20040000119
Phone : (850)651-3011
Fax Number : (850)651-3306

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Email Address: Karnise804@gmail.com

FLORIDA LIMITED LIABILITY CO.
2 Twins, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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ARTICLES OF ORGANIZATION

2 TWINS, LLC

The undersigned subscribers hereby form a limited liability company under the laws of the State of Florida, Florida Statutes, Chapter 605 as follows:

ARTICLE I

NAME

The name of this limited liability company shall be **2 TWINS, LLC**.

ARTICLE II

PRINCIPAL OFFICE AND MAILING ADDRESS

The mailing address and the street address of the principal office of the limited liability company is 804 Melissa Court, Fort Walton Beach, Florida 32547.


ARTICLE III

INITIAL REGISTERED OFFICE AND AGENT

The name and street address of the limited liability company's registered office is :

DANIEL C. PERRI
4 Eleventh Avenue, Suite One
Shalimar, Florida 32579.

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.


DANIEL C. PERRI
Registered Agent

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ARTICLE IV MANAGEMENT

The name and address of the manager of the limited liability company is as follows:

Karnise D. Schweizer- MGR
804 Melissa Court
Fort Walton Beach, Florida 32547

Management shall be by the person above named.

IN WITNESS WHEREOF, the undersigned, being the authorized representative for the members, has hereunto set his hand and seal on this the 29th day of August, 2014, for the purpose of forming a limited liability company to do business both within and without the State of Florida and does make and file in the Office of the Secretary of State of Florida these Articles of Organization and affirms under penalties of perjury that the facts stated herein are true.

AUTHORIZED REPRESENTATIVE: 14 SEP - 2

D. C. Perri
Daniel C. Perri

In accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in 1817.155, FS.

STATE OF FLORIDA
COUNTY OF OKALOOSA

Sworn to and subscribed before me this 29th day of August, 2014, by Daniel C. Perri, who has produced _____ as identification, or who is personally known to me.

WITNESS my hand and official seal in the State and County last aforesaid this 29th day of August, 2014.



Charlene Chang
CHARLENE CHANG
Notary Public
My commission expires: 07/04/2017

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