## L14006163838

(Requestor's Name)	
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(Business Entity Name)	
(Document Number)	
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SECREJARY OF STATE
FALLAHASSEE, FLORIDA

J. Shivers OCT 2 1 2014



## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 13, 2014

JOSHUA BROWN 180 PELICAN WAY PANACEA, FL 32346

SUBJECT: THE BROWN COMPANY LLC

Ref. Number: W14000062355

We have received your document for THE BROWN COMPANY LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers Regulatory Specialist II Registration/Qualification Section

Letter Number: 914A00021877

## **COVER LETTER**

	istration Section sion of Corporations		
SUBJECT:	The Brow Name of Lin	nited Liability Company	LLC.
The enclosed	Articles of Organization and fee(s) ar	re submitted for filing.	
Please return	all correspondence concerning this ma	atter to the following:	
	Joshua E	Name of Person	
_	,	Firm/Company	
· · <u>-</u>	180 Pelican	Way	·
· · · · · · · · ·	Panacea, fl	32346	
L. Comment	E-mail address: (to be used	ity/State and Zip Code  1. CUM  1 for future annual report notifica	tion)
For further in	formation concerning this matter, plea	ase call:	
Josha	Name of Person at (		385 ephone Number
Enclosed is a	check for the following amount:		
\$125.00 Filin	g Fee \$\square\$\$\\$130.00 \text{ Filing Fee & Certificate of Status}\$	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 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 Adda Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Salt line Realty LLC  (Must end with the words "Limited Llability 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:  180 Peli can way Pana ua Fl 32346  Pana ua Fl 32346
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:  Name
Florida street address (P.O. Box NOT adceptable)
Ponglea FL 32346 City 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 (REQUIRED)  Registered Agent's Signature (REQUIRED)
(CONTINUED)  Page 1 of 2  Page 1 of 2

"AMBR" = Authorized Member "MGR" = Manager	Toshua E. Brown
	Joshya E. Brown
HMBK/	130 Pelican way
	1900 Pelitan wan
	- romacea 181346
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	•
(Use attachment if necessary)	,
effective date is listed, the date must be specific and	cannot be more than five business days prior to or 90
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Effective date is listed, the date must be specific and the of filing.)  CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member or (In accordance with section 109.0203 (1))	an authorized representative of a member.  (b), Florida Statutes, the execution of this document
REQUIRED SIGNATURE:  Signature of a member or  (In accordance with section 905,0203 (1) constitutes an affirmation under the pena	an authorized representative of a member.  (b), Florida Statutes, the execution of this document alties of periury that the facts stated herein are true.
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