

L16000092538

(Requestor's Name)

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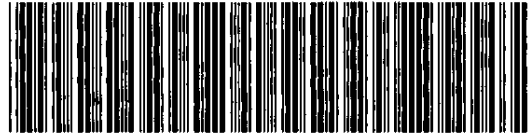
(Business Entity Name)

(Document Number)

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16 MAY 13 PM 2:12  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

N. Culligan APR 14 2016

**GLEN C. ABBOTT**

ATTORNEY AT LAW

109 NE 4<sup>th</sup> Street  
Crystal River, FL 34429-4145

Phone: (352)795-5699  
Fax: (352)795-0432

April 11, 2016

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

Re: The Twist LLC.

Dear Sir or Madam:

The enclosed Articles of Organization and fee(s) of \$155.00 are submitted for filing.

Please return all correspondence concerning this matter to the following:

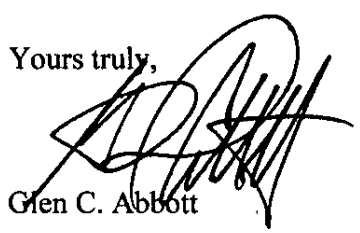
Law Office of Glen C. Abbott  
109 NE 4<sup>th</sup> Street  
Crystal River, FL 34429-4145

Email address to be used for future annual report notification is:  
studio201@paintingwithatwist.com

For further information concerning this matter, please call:

Law Office of Glen C. Abbott  
(352) 795-5699

Yours truly,

  
Glen C. Abbott

GCA/lm  
Enclosure



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 19, 2016

LAW OFFICE OF GLEN C ABBOTT  
109 NE 4TH STREET  
CRYSTAL RIVER, FL 34429-4145

SUBJECT: THE TWIST LLC  
Ref. Number: W16000028799

COPY

We have received your document for THE TWIST LLC and your check(s) totaling \$155.00. 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 the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at [www.sunbiz.org](http://www.sunbiz.org).

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

Please return 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) 245-6052.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 516A00008034

RECEIVED  
16 MAY 13 PM 12:28  
SEAL OF THE STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION  
FOR  
THE TWISTED CORK, LLC  
A LIMITED LIABILITY COMPANY  
(Pursuant to 605.0201, Florida Statutes)**

16 MAY 13 PM 2:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

**ARTICLE I  
NAME OF COMPANY**

The name of the Limited Liability Company is **THE TWISTED CORK, LLC**

**ARTICLE II  
PURPOSE**

The purpose of this limited liability company is to operate a bar selling beer and wine and may also include the transaction of any and all lawful business for which limited liability companies may be organized in the State of Florida.

**ARTICLE III  
PRINCIPAL OFFICE**

The principal office and mailing address of the limited liability company is 4351 Commercial Way, Springhill, Florida 34606.

**ARTICLE IV  
MANAGEMENT**

The limited liability company is to be managed by one or more of its members and is, therefore, a member-managed company. The original members of the LLC are:

Samuel Piliouras (AMBR)  
19 Beech Court South  
Homosassa, FL 34446

Aurelia Piliouras (AMBR)  
19 Beech Court South  
Homosassa, FL 34446

**ARTICLE V  
REGISTERED AGENT, REGISTERED OFFICE  
And REGISTERED AGENT'S SIGNATURE**

The name and Florida street address of the initial Registered Agent for service of process on the Company in the State of Florida is:

Samuel Piliouras  
19 Beech Court South  
Homosassa, FL 34446

*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, Florida Statutes.

  
SAMUEL PILIOURAS

#### ARTICLE VI EFFECTIVE DATE

The effective date of the limited liability company shall be the date of filing.

#### ARTICLE VII DURATION

The Company shall have perpetual duration beginning on the date these Articles of Organization are filed by the Florida Department of State, or until dissolved in a manner provided by law or as provided in the regulations adopted by the members.

#### ARTICLE VIII OPERATING AGREEMENT

Any Operating Agreement as amended, Florida Statutes Code §§ 605.010-605.108, relating to this Company must be in writing and signed by all of the Members.

#### ARTICLE IX OFFICERS

The initial officers of the limited liability company shall be as follows:

President	Samuel Piliouras
Secretary/Treasurer	Aurelia Piliouras

who shall hold such offices until their successors are named and qualified at the first annual meeting of the limited liability company.

IN WITNESS WHEREOF, I/we have signed these Articles of Organization and acknowledged them to be my act this 9 day of May, 2016.

  
SAMUEL PILIOURAS

This document is executed in accordance with section 605.0203(1)(b), Florida Statutes. 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 s.817.155, F.S.

16 MAY 13:12 PM 2:12  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA