16000119437

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
	•	

Office Use Only

W/00027476

SUN 2 4 2016

T. SCOTT



200283790202

04/08/16---01024--013 **125.00

O JUN 23 AMIL: 39



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 27, 2016

BRADLEY K BOSENBERG 40 HUGGINS ROAD DEFUNIAK SPRINGS, FL 32433

SUBJECT: TWIN LAKES LLC Ref. Number: W16000027476

We have received your document for TWIN LAKES 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.

Registered agent must sign.

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.

Tyrone Scott Regulatory Specialist II

Letter Number: 916A00010783

COVER LETTER

Di	vision of Corporations
SUBJECT:	SATSUMA PROPERTIES, LLC
	Name of Limited Liability Company
The enclose	d Articles of Organization and fee(s) are submitted for filing.
Please retur	n all correspondence concerning this matter to the following:
	BRADLEY K BOSENBERG
	Name of Person
	SATSUMA PROPERTIES, LLC
	Firm/Company
	40 HUGGINS ROAD
•	Address
	DEFUNIAK SPRINGS, FL 32433
b	City/State and Zip Code radleykbosenberg@yahoo.com
_	E-mail address: (to be used for future annual report notification)
For further in	formation concerning this matter, please call:
I	BRADLEY K BOSENBERG 850 585-5252
_	Name of Person Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:
\$125.00 Fil	ing Fee \$\int_{\text{S130.00 Filing Fee & Certificate of Status}}\ \int_{\text{S155.00 Filing Fee & Certificate of Status}}\ \int_{\text{S160.00 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)}\ \int_{\text{Certified Copy (additional copy is enclosed)}}\ \end{additional copy is enclosed}
	Mailing Address Street Address

. .. : : :

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

New Filing 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:	
SATSUMA PROPERTIES, LLC	
(Must end with the words "Limited Liabili	tty 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:
40 HUGGINS ROAD	40 HUGGINS ROAD
DEFUNIAK SPRINGS, FL 32433	DEFUNIAK SPRINGS, FL 32433
ARTICLE III - Registered Agent, Registered Office, & Registered Liability Company cannot serve as its own Register another business entity with an active Florida registration.)	istered Agent's Signature: cred Agent. You must designate an individual or

The name and the Florida street address of the registered agent are:

BRADLEY K BOSEN	NBERG	
	Name	
40 HUGGINS ROAD		
Florida street address	(P.O. Box NOT ac	eceptable)
DEFUNIAK SPRING	S FL	32433
City	State	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 (REOUIRED)

(CONTINUED)

Page 1 of 2

16 JUN 23 MH II: 39

DIVISION OF GRICEGEAGENE

Title: "AMBR" =	Authorized Member	Name and Address:
"MGR" = N		
AMBR		BRADLEY K BOSENBERG
		40 HUGGINS ROAD
		DEFUNIAK SPRINGS, FL 32433
AMBR		AMANDA S BOSENBERG
	.	40 HUGGINS ROAD
		DEFUNIAK SPRINGS, FL 32433
		M
(Use attachr	ment if necessary)	
EV: Effective date is of filing.) I the date insoment's effective.	s listed, the date must be spected in this block does not tive date on the Department provisions, if any.	meet the applicable statutory filing requirements, this date will not be
LE V: Effective date is of filing.) If the date insoment's effective VI: Other ND ALL LAN	s listed, the date must be spected in this block does not tive date on the Department provisions, if any. WFUL BUSINESS D SIGNATURE:	meet the applicable statutory filing requirements, this date will not be tof State's records.
EV: Effective date is of filing.) I the date insoment's effect. EVI: Other ID ALL LAN	erted in this block does not tive date on the Department provisions, if any. WFUL BUSINESS D SIGNATURE: Signature of a m This document is exect I am aware that any false	meet the applicable statutory filing requirements, this date will not be tof State's records.
EV: Effective date is of filing.) the date insement's effective VI: Other DALL LAN	erted in this block does not tive date on the Department provisions, if any. WFUL BUSINESS D SIGNATURE: Signature of a m This document is exect I am aware that any false	meet the applicable statutory filing requirements, this date will not tof State's records. Lember or an authorized representative of a member. Intended in accordance with section 605.0203 (1) (b), Florida Statutes, see information submitted in a document to the Department of State see felony as provided for in s.817.155, F.S.

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)