

L21000296208

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

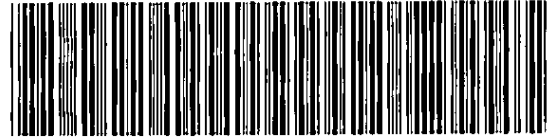
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FL

06/24/21--01001--007 **125.00

2021 JUN 23 PM 3:09
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

BLUE SATURN, LLC

Signature _____

Requested by: _____

Name _____ Date _____ Time _____

Walk-In _____ Will Pick Up _____

172 Pender's Printing • Tallahassee, FL 32301

_____ Art of Inc. File _____
_____ LTD Partnership File _____
_____ Foreign Corp. File _____
_____ L.C. File _____
_____ Fictitious Name File _____
_____ Trade/Service Mark _____
_____ Merger File _____
_____ Art. of Amend. File _____
_____ RA Resignation _____
_____ Dissolution / Withdrawal _____
_____ Annual Report / Reinstatement _____
_____ Cert. Copy _____
_____ Photo Copy _____
_____ Certificate of Good Standing _____
_____ Certificate of Status _____
_____ Certificate of Fictitious Name _____
_____ Corp Record Search _____
_____ Officer Search _____
_____ Fictitious Search _____
_____ Fictitious Owner Search _____
_____ Vehicle Search _____
_____ Driving Record _____
_____ UCC 1 or 3 File _____
_____ UCC 11 Search _____
_____ UCC 11 Retrieval _____
_____ Courier _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 24, 2021

CAPITAL CONNECTION

SUBJECT: BLUE SATURN LLC
Ref. Number: W21000092007

We have received your document for BLUE SATURN 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 wrong filing form was submitted if you want to file a LLC.

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 III

Letter Number: 121A00014453

2021 JUN 25 PM 3:25
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CONFIRMATION

TO: New Filing Section
Division of Corporations

SUBJECT: Blue Saturn, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and Fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jonathan Steszewski, Esq.
Name of Person

Steszewski Medina, P.A.
Firm Name

15100 NW 67th Ave, suite 200
Street Address

Miami Lakes, FL 33014
City, State, and Zip Code

jonathan@steszewski-medina.com
E-mail address (to be used for filing fee and report notification)

For further information concerning this matter, please call:

Jonathan Steszewski 305 631-2438
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$135.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

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

Street Address

New Filing Section
Division of Corporations
Executive Center Building
Executive Center Circle
Tallahassee, FL 32301

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SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Blue Saturn, LLC

(Must contain the words "Limited Liability Company," "LLC," or "L.L.C.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

15100 NW 67th Ave, Suite 200
Miami Lakes, FL 33014

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:

Jonathan Staszewski

Name

15100 NW 67th Ave, Suite 200

Florida street address (P.O. Box 5001 acceptable)

Miami Lakes, FL 33014

City

State

Zip

Having been named as registered agent and to act in this capacity for the above stated limited liability company at the place designated in this certificate, I hereby accept 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 complete performance of my duties, and I am familiar with and accept the obligations of my position as provided for in Chapter 605, F.S.

Jonathan Staszewski
Registered Agent

(Signature REQUIRED)

WITNESSETH

ARTICLE IV-

The name and address of each person authorized to exercise control of the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Jonathan Steszewski
15153 NW 67th Ave. Suite 200
Miami Lakes, FL 33014

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____, (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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's record.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Signature of a member or authorized representative of a member.
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that any false or false information provided in a document to the Department of State
constitutes a third degree felony pursuant to section 817.155, F.S.

Jonathan Steszewski
(typed or printed name of signer)

Filing Fee:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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2021 JUN 25 AM 9:13

SECRETARY OF STATE
TALLAHASSEE, FL