M13000000930

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DEPARTMENT PH 1:53

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113-827



ACCOUNT NO. : I2000000195 REFERENCE : 526297 AUTHORIZATION : COST LIMIT : \$ 125.00 ORDER DATE: February 8, 2013 ORDER TIME : 12:03 PM ORDER NO. : 526297-005 CUSTOMER NO: 4324340 FOREIGN FILINGS NAME: TALLY 1, LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: ___ CERTIFIED COPY XX PLAIN STAMPED COPY _____ CERTIFICATE OF GOOD STANDING CONTACT PERSON: Carina L. Dunlap -- EXT# 52951

EXAMINER:



February 11, 2013

CSC CARINA L DUNLAP

SUBJECT: TALLY 1, LLC Ref. Number: W13000008278



We have received your document for TALLY 1, 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 document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

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.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 613A00003297

13 FEB 12 PH 1: 5

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN TI	THE STATE OF FLORIDA:
1. TALLY 1, LLC	
(Name of Foreign Limited Liability Company; must incl	clude "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purp consent of the managers or managing members adopting the alt Company," "L.L.C," "LLC.")	pose of transacting business in Florida and attach a copy of the written lternate name. The alternate name must include "Limited Liability
2. DELAWARE	_{3.} 46-1612863
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. 11/27/2012	5. N/A
(Date of Organization)	(Duration: Year limited liability company will cease to
_{6.} 11/27/2012	
(Date first transacted business in F (See sections 608.501 & 608.502 F.	S. to determine penalty liability)
_{7.} 568 9th Street South, Suite 276, Na	aples, Florida 34102
	Sess of Principal Office)
(Street Addres	ess of Principal Office)
8. If limited liability company is a manager-manage	ed company, check here
	• •
The name and usual business addresses of the ma	anaging members or managers are as follows:
Annette Scott	·
568 9th Steet South, Suite 276	
Naples, FL 34102	
the jurisdiction under the law of which it is organized. (A photoc translation of the certificate under oath of the translator must be sa	nrivato invoetmente
11. Nature of business or purposes to be conducted	or promoted in Florida:
1 Danie) \ (ou
~ \ \	authorized representative of a member.
penalties of perjury that the facts stated herein are t	xecution of this document constitutes an affirmation under the true. I am aware that any false information submitted in a stes a third degree felony as provided for in s.817.155, F.S.)
ANNETTE	
Typed or printe	ted name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability C TALLY 1, LLC	ompany is:	
If unavailable, the alternate to be used i	n the state of Florida is:	
2. The name and the Florida street addr	ess of the registered agent and office are:	CONTRACTOR OF THE CONTRACTOR O
Annette Scot	t	ZATA I
	(Name)	超電工
568 9th Stree	et South, Suite 276	SSE & F
Florida Stree	Address (P.O. Box NOT ACCEPTABLE)	THE E
Naples,	_{FL} 34102	IO: 51 LORIDA
	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 608, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TALLY 1, LLC" IS DULY FORMED UNDER

THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW,

AS OF THE EIGHTH DAY OF FEBRUARY, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TALLY 1, LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF NOVEMBER, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5247891 8300

130148804

Jeffrey W Bullock, Secretary of State

AUTHENTY CATION: 0203422

DATE: 02-08-13

You may verify this certificate online at corp.delaware.gov/authver.shtml