

L050000 68977

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

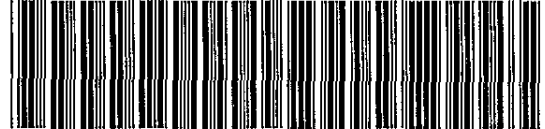
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000056597190

07/13/05--01004--023 \*\*155.00

RECEIVED  
05 JUL 13 AM 10:30  
STATE  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED  
05 JUL 13 PM 4:55  
STATE  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Incorporating Services, Ltd. - Melissa A. Murry

Requester's Name

2855 Apalachee Pkwy., Bldg. A, Suite 16

Address

Tallahassee, FL 32301 656-7956

City/State/Zip

Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. TATCO PRIVATE WEALTH MANAGEMENT LLC

(Corporation Name)

(Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 6/14/2005

☐ Mail out

☐ Will wait

☐ Photocopy

☒ Certified Copy

☐ Certificate of Status

WITH APOSTILLE  
FOR SWITZERLAND

**NEW FILINGS**

☐ Profit

☐ Not for Profit

☒ Limited Liability

☐ Domestication

☐ Other

**AMENDMENTS**

☐ Amendment

☐ Resignation of R.A., Officer/Director

☐ Change of Registered Agent

☐ Dissolution/Withdrawal

☐ Merger

**OTHER FILINGS**

☐ Annual Report

☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

☐ Foreign

☐ Limited Partnership

☐ Reinstatement

☐ Trademark

☐ Other

Examiner's Initials

FILED  
05 JUL 13 PM 4:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**Article I – Name:**

The name of the Limited Liability Company is:

TATCO PRIVATE WEALTH MANAGEMENT LLC

**Article II – Address:**

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

**Principal Office Address:**

415 Fonseca Way  
Palm Beach Gardens, FL 33410

**Mailing Address:**

415 Fonseca Way  
Palm Beach Gardens, FL 33410

**Article III – Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Mr. Tarkan Toksu  
415 Fonseca Way  
Palm Beach Gardens, FL 33410

*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 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, F.S.*



\_\_\_\_\_  
Registered Agent's Signature

(CONTINUED)  
PAGE 1 OF 2

**FILED**  
05 JUL 13 PM 4:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Article IV – Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

Sole MGR

**Name and Address:**

Mr. Tarkan Toksu  
415 Fonseca Way  
Palm Beach Gardens, FL 33410

**Article V – Purpose:**

The purpose of the limited liability company is to deal in any lawful business and also trade of any kind as well as investment of any kind anywhere in the world.

**Article VI – Sole Manager:**

The Sole Manager can sign individually on behalf of the limited liability company.

**REQUIRED SIGNATURE:**

\_\_\_\_\_  
Signature of a member or an authorized representative of a member.

(In accordance with section 608.40(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

TARKAN TOKSU

\_\_\_\_\_  
Typed or printed name of signee