L08000104180

(Re	questors Name)	
(Ad	dress)	•
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
· (Oil)	y/Otato/Zip/i non	<i>c </i>
PICK-UP	WAIT	MAIL
. (Bu	siness Entity Nar	ne)
	•	
(Do	cument Number)	
•	,	
Cartified Conies	Cortificator	of Status
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
,		·

Office Use Only



500136466465

10/03/08--01015--021 **120.00

11/10/08--01001--012 **5.00

2000 NOV -6 PH 4: 31

E processor of the second of t

W. 117,8

COVER LETTER

TQ:	Registration Section Division of Corporations		
SUBJI	ECT: Falcon Consulting LLC.		
		ited Liability Compa	iny)
The en	closed Articles of Organization and fee(s) are	e submitted for filing	; .
Please	return all correspondence concerning this ma	atter to the following	:
	Robert W. Tyree III		
		(Name of Person)	
	Falcon Consulting LLC.		
		(Firm/Company)	
	1307 Belmont Place		
		(Address)	
	Boynton Beach, FL 33436		
	(C	Consulting LLC. (Name of Limited Liability Company) Organization and fee(s) are submitted for filing. Indence concerning this matter to the following: Tyree III (Name of Person) Insulting LLC. (Firm/Company) Ont Place (Address) Peach, FL 33436 (City/State and Zip Code) Oncerning this matter, please call: at (954) 857-1877 (Area Code & Daytime Telephone Number) the following amount:	
For fur	ther information concerning this matter, plea	se call:	
Rob	ert Tyree	at (954	857-1877
	(Name of Person)	(Area Cod	e & Daytime Telephone Number)
Enclos	sed is a check for the following amount:		
✓ \$125.	00 Filing Fee \$\sum \\$130.00 Filing Fee & Certificate of Status	Certified Cop	py Certificate of Status & Certified Copy
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton B 2661 Exe	on Section of Corporations uilding secutive Center Circle see, FL 32301



October 6, 2008

ROBERT W. TYREE III FALCON CONSULTING LLC 1307 BELMONT PLACE BOYNTON BEACH, FL 33436

SUBJECT: FALCON CONSULTING LLC.

Ref. Number: W08000046010

We have received your document for FALCON CONSULTING LLC. and check(s) totaling \$120.00 of which \$120.00 has been designated to file this document. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is an additional amount of \$5.00 due. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

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. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

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. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is P03000010658.

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) 245-6047.

Carolyn Lewis Regulatory Specialist II Registration Section

Letter Number: 408A00052698

To Whom It May Concern:

11/04/2008

I recently sent in a request to register an LLC as Falcon Consulting with a check for \$120.00. This was not enough needing \$125.00 and my name I was requesting was already taken as well. I am resubmitting the information with the new name and 5\$ that was need to fully process things. Please contact me if there are any questions or problems. Thanks.

Robert and Laura Tyree,

Tyree Marketing and Consulting

954-857-1877 – Phone

866-514-8922 - Fax

RobTyree44@Comcast.net

COVER LETTER

TO: Registration Section Division of Corporations	, S
SUBJECT. Tyree Market	ting and Consulting
SUBJECT:	(Name of Limited Liability Company)
The enclosed Articles of Organizat	Division of Corporations UBJECT: Tyree Marketing and Consulting (Name of Limited Liability Company) the enclosed Articles of Organization and fee(s) are submitted for filing. lease return all correspondence concerning this matter to the following: Robert W. Tyree III and Laura M. Tyree (Name of Person) Tyree Marketing and Consulting (Firm/Company) 1307 Belmont Place (Address) Boynton Beach, FL 33436 (City/State and Zip Code) or further information concerning this matter, please call: Robert Tyree (Name of Person) 857-1877 (Name of Person)
Please return all correspondence co	oncerning this matter to the following:
Robert W. Tyree	
	(Name of Person)
Tyree Marketing	and Consulting
	(Firm/Company)
1307 Belmont PI	ace
	(Address)
Boynton Beach,	FL 33436
	(City/State and Zip Code)
For further information concerning	this matter, please call:
	at ()
((Act cost a bij interprete Number)
Enclosed is a check for the follo	wing amount:
S125.00 Filing Fee S130.0 Certific	cate of Status Certified Copy Certificate of Status & Certified Copy Certified Copy
Registra Division P.O. Bo.	tion Section Registration Section of Corporations Division of Corporations

FILED

2008 NOV -6 PM 4: 31

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANYATE TALL AHASSEE, FLORIDA

	TALLAHASSEE, FLO
ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Tyree Marketing and Consulting LL	
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1307 Belmont Place	1307 Belmont Place
Boynton Beach, FL 33436	Boynton Beach, FL 33436
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another
The name and the Florida street address of the re	egistered agent are:
Robert W. Tyree III	
Name	
1307 Belmont Place	
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)
Boynton Beach 3343	$6_{\!\scriptscriptstyle \mathrm{FL}}$
City, State, a	nd Zip
Having heen named as registered agent and to a	secant samica of process for the above stated limited

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; F.S.

Registered Agent's Signature (REQUIRED)

10V -6 PM 4:3

ARTICLE IV- Manager(s) or Managing Member(s):

FILED

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

<u>Title:</u>	Name and Address:	2008 NOV -6	PH 4:
"MGR" = Manager		constab.	
"MGRM" = Managing Member		SEURETAR I TALLAHASSE	E, FLO
MGR	Robert W. Tyree III		
	1307 Belmont Place		
	Boynton Beach, FL 33436		
MGR	Laura M. Tyree		
	1307 Belmont Place	· matter	
	Boynton Beach, FL 33436		
-			
(Use attachment if necessary)			
CLE V: Effective date, if other than	the date of filing:	(OPTION	JAT.)
ffective date is listed, the date mus			
days after the date of filing.)			
,			
REQUIRED SIGNATURE:			
REQUIRED SIGNATURE.			
	/		
Signature of a mer	mber or an authorized representative o	f a member.	
(In accordance with	mber or an authorized representative on section 608.408(3), Florida Statutes, the constitutes an affirmation under the penalti	execution	

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)

Cobert Tyree
Typed or printed name of signee