# L12000117437

(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

B. KOHR

SEP 13 2012

**EXAMINER** 



100237193791

07/11/12--01022--006 \*\*130.00

12 SEP 12 PM 4: 02

SECRETARY OF STATE

# COVER LETTER,

TO: Registration Section Division of Corporations
SUBJECT: TURPS TOVESTMENTS LLC  Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
The enclosed Articles of Organization and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  Yariskay A. Perez  Name of Person
Name of Ferson
Firm/Company
1940 SE and Street Address
Panpano beach Fl 33060
City/State and Zip Code  YPET CZ Q a - F - Solutions. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Varies Val Perez at (561) 401 8591  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
125.00 Filing Fee \$\times 130.00\$ Filing Fee \$\times Certificate of Status \$\times Certified Copy (additional copy is enclosed) \$\times 160.00\$ Filing Fee, Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301



### FLORIDA DEPARTMENT OF STATE Division of Corporations

July 12, 2012

YARISKAY A. PEREZ 1940 S.E. 2ND STREET POMPANO BEACH, FL 33060

SUBJECT: TULIPS INVESTMENTS, LLC

Ref. Number: W12000036967

We have received your document for TULIPS INVESTMENTS, LLC and your check(s) totaling \$130.00. 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.

## Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The existing entity with a similar name is TULIP INVESTMENTS, INC. -- Doc. Number G41241.

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) 245-6051.

Buck Kohr Regulatory Specialist II

Letter Number: 412A00018686

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

# **COVER LETTER**

TO: Registration S Division of Co			
SUBJECT: TO	1995 Tovestmen Name of Limited L		\$ 527 \2
The enclosed Articles o	of Organization and fee(s) are subn	nitted for filing.	
Please return all corresp	oondence concerning this matter to	the following:	
<u> </u>	Yariskay A.	Perez ne of Person	
	Firr	n/Company	
	1940 SE	and Street	<u></u>
	Pampano bo	Each Fl 3?	5060
	E-mail address: (to be used for fu	- Solutions. (ture annual report notification)	COM
For further information	concerning this matter, please call	l:	
Varisk Name	day Perez at of Person	(561) 401 & Area Code & Daytime Telep	591 ohone Number
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	to Table
The name of the Limited Liability Company is:	
TULIP SOLUTIONS LLO	<del></del>
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:
1940 SE and Street Pompano beach, F133060	1940 SE and Street Pomponio neach, 1133060
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	Office, & Registered Agent's Signature: red Agent. You must designate an individual or another
The name and the Florida street address of the re	gistered agent are:
YariskaY Name	Perez
Florida street addi	940 SE 201 St. ess (P.O. Box NOT acceptable)
Pompano loch City, Stat	FL 33060 te, and Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	ccept service of process for the above stated limited its certificate, I hereby accept the appointment as further agree to comply with the provisions of all formance of my duties, and I am familiar with and level agent as provided for in Chapter 608, F.S

(CONTINUED)
Page 1 of 2

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

A. 10 . 1 . 1 . 1

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

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Tomano beach, Fl. 33000
<u>(16)11</u>	YOURSKAY H. HEREZ 1940 DE AND STREET. YOUR ROND GEOCH, FT, 33060
·	<u></u>
	<u> </u>
(Use attachment if necessary)	1 .
ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must to or 90 days after the date of filing.)	e date of filing: 4 6 2012. (OPTIONAL) be specific and cannot be more than five business days prior

**REQUIRED SIGNATURE:** 

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

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Typed or printed name of signee

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)