L130000106179

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N. Cuttigan JUL 2 6 2013

(850) 245-6051.

COVER LETTER

TO:

Registration Section **Division of Corporations**

Touchstone Group Florida, 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:

Blake Townsley

Touchstone Group

Firm/Company

1425 W. Belmont,

Address

Chicago, Illinois 60657

City/State and Zip Code

blake@touchstonechicago.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gina Vallone

_{at} 312 541-8600

Name of Person

Enclosed is a check for the following amount:

□\$125.00 Filing Fee

□\$130.00 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 Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 15, 2013

BLAKE TOWNSLEY TOUCHSTONE GROUP 1425 W. BELMONT, UNIT C CHICAGO, IL 60657

SUBJECT: TOUCHSTONE GROUP FLORIDA, LLC D/B/A TOUCHSTONE

GROUP TAMPA BAY LLC Ref. Number: W13000039701

We have received your document for TOUCHSTONE GROUP FLORIDA, LLC D/B/A TOUCHSTONE GROUP TAMPA BAY LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

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.

Neysa Culligan Regulatory Specialist II

Letter Number: 013A00017169

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nau		_		
The name of the Li	mited Liability Company is	S.		
Touchstone Group Flori	da, LLC			
(Mu	st end with the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")		
ARTICLE II - Ad	dress:			
The mailing addres	s and street address of the	principal office of the Limited	1 Liability Company is:	
Principal Office A	ddress:	Mailing Address:		
1425 W. Belmont, Un	nit C	1425 W. Belmont, Unit C		
Chicago, Illinois 6065	7	Chicago, Illinois 60657		
				
The name and the F	Florida street address of the Countland Townsley	e registered agent are:	7. 28 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2	
	Nan	ne		1
	351 Channelside Walk Way,	#4101	26 ARY 1336	
	Florida street a	iddress (P.O. Box <u>NOT</u> acceptable)) mo	
	Tampa, FL 33602	FL	PN 2: FLOR	ب
	City,	State, and Zip	\$\frac{1}{2} \tag{2} \tag{2}	
liability compan registered agent a all statutes relati	ny at the place designated in and agree to act in this cape ing to the proper and compl	o accept service of process for n this certificate, I hereby acce acity. I further agree to compl lete performance of my duties, registered agent as provided f	r the above stated limited ept the appointment as ly with the provisions of and I am familiar with	
	Courtland 7	Townsley		

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member Courtland Townsley 351 Channelside Walk Way, #4101 Tampa, Florida 33602 (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.) **REQUIRED SIGNATURE:** Courtland Townsley 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

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)

constitutes a third degree felony as provided for in s.817.155, F.S.)

Courtland Townsley

Typed or printed name of signee