## L140000 58250

(Requestor's Name)	
(Address)	
(Address)	
,	
(City/State/Zip/Phone #)	_
(City/State/Zip/Fitotie #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
(2001)	
Contillation Contillation of Chattan	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	
	ı

Office Use Only

000258378730

04/07/14--01039--023 \*\*125.00

TALLAHASSEL FLORIDA

2014 APR -7 PM 12: 27

APR - 9 2013 T. HAMPTON

## **COVER LETTER**

	egistration Section ivision of Corporations		
	: 3 PILLAR S Name of L	OLUTIONS, LL imited Liability Company	<u>C</u>
The enclose	ed Articles of Organization and fee(s)	are submitted for filing.	
Please retu	rn all correspondence concerning this i	matter to the following:	
	KATHY	S. MCGUILE Name of Person	
		Firm/Company	
	104 DOE	TRAIL	·
		Address	
	SUPITER	Address  FL 3345  City/State and Zip Code	8
	Kathy @ 301 E-mail address: (to be us	City/State and Zip Code        Columbia   City   Code   Co	.com
For further	information concerning this matter, pl	ease call:	
KA	Name of Person	561 748.6 Area Code Daytime Te	750 Jephone Number
Enclosed is	s a check for the following amount:		
\$125.00 Fi	ling Fee \$\Bigcup \frac{1}{30.00}\$ 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	Street/Courier Add	ress
	Registration Section	Registration Section	tions

Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
3 PILLAR SOLUTA (Must end with the words "Limited I	IONS, LLC
(Must end with the words "Limited l	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal of	fice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
104 DOE TRAIL JUPITER, FL 33458	GAME
33458	
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own I another business entity with an active Florida registration	Registered Agent. You must designate an individual or
The name and the Florida street address of the registered	agent are:
Dennis Le	one
Name	
<u>609 E. Jack</u>	(SON St., #100
Florida street address (P.O. Box	<del> </del>
City	FL 33602 Zip
the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of my duties, and I am familiar with and accept the oblice Chapte	vice of process for the above stated limited liability company a the appointment as registered agent and agree to act in this f all statutes relating to the proper and complete performance igations of my position as registered agent as provided for in er 605, F.S
Registered Agent's Signate  (CONTINUE  Page 1 of 2	ZOIL APR -7 SECKE LABOR TALLAHARSE
	PH IZ:

Title: "AMBR" = Authorized "MGR" = Manager AM BR	i Member	Name and Address:  ATHY S. M. GUIRE  104 DOE TRAIL  JUPITER, FL 33458
		JUPITER, FL 33458
***	_	
	_	· .
	_	
Use attachment if nec EV: Effective date, if ctive date is listed, th	other than the date of fil	ing: (OPTIONAL) and cannot be more than five business days prior to or 9
EV: Effective date, if ctive date is listed, the filling.)	other than the date of file date must be specific	ing: (OPTIONAL) and cannot be more than five business days prior to or 9
E V: Effective date, if	other than the date of file date must be specific if any.	ing: (OPTIONAL)  and cannot be more than five business days prior to or 9
E V: Effective date, if ctive date is listed, the filling.)  E VI: Other provisions  REQUIRED SIGNAT  (In accordance constitutes a 1 am aware to serve date is listed, the filling.)	other than the date of file date must be specific if any.  FURE:  Signature of a member ce with section 605.020 in affirmation under the hat any false informatio	ing:
E V: Effective date, if ctive date is listed, the filling.)  E VI: Other provisions  REQUIRED SIGNAT  (In accordance constitutes a 1 am aware to serve date is listed, the filling.)	other than the date of file date must be specific and the specific of the spec	and cannot be more than five business days prior to or 9  W. J. W. J. W. J.
E V: Effective date, if ctive date is listed, the filling.)  E VI: Other provisions  REQUIRED SIGNAT  (In accordan constitutes a 1 am aware t constitutes a	other than the date of file date must be specific and the specific of any.  FURE:  Signature of a member ce with section 605.020 affirmation under the hat any false informatio third degree felony as property of Articles of Organiz	and cannot be more than five business days prior to or 9  W. M. W. J. W. J. W. J.