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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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FILED

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SECRETARY OF STATE

JUN - 5 2014 T. RROMAN

COVER LETTER

	TO: Registration Section Division of Corporations	
	SUBJECT: Tilly & Co. 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:	
	Name of Person	
	· · · · · · · · · · · · · · · · · · ·	
	Tilly & CO. LhC Firm/Company	
	1465 14th Terrace Address	
	Pulm Beach Gardens Fl 33418 City/State and Zip Code	
	Palm Black Gardens fl 334/8 City/State and Zip Code Miller fraggen @ gmail. Com E-mail address: (to be used for future annual report notification)	
	For further information concerning this matter, please call:	
	Tracy A. Miller at (330) 931. 0156 Name of Person Area Code Daytime Telephone Number	
	Enclosed is a check for the following amount:	
[☐ \$125.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	d)
	Mailing Address Street/Courier Address	

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

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



May 15, 2014

TRACY A MILLER
TILLY & CO. L.L.C.
1405 14TH TERRACE
PALM BEACH GARDENS, FL 33418

SUBJECT: TILLY & CO. L.L.C. Ref. Number: W14000030992

We have received your document for TILLY & CO. L.L.C. 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 of the entity cannot include "CO." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

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 the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. 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 contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

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.

Teresa Brown Regulatory Specialist II

Letter Number: 314A00010524

, ,		
ARTICLES OF ORGANIZATION	FOR FLORIDA LIMITED LIABILITY COM	IPANY
ARTICLE I - Name: The name of the Limited Liability Company is:		10000000000000000000000000000000000000
Must end with the words "L	imited Liability Company, "L.L.C.," or "L	TC., Land
ARTICLE II - Address: The mailing address and street address of the prince	cipal office of the Limited Liability Compa	any is:
Principal Office Address:	Mailing Address:	EFFECTIVE DATE
1405 14 To Terrace Palm beach Gordens Fl 33418	SUME	5-6-14
ARTICLE III - Registered Agent, Registered O (The Limited Liability Company cannot serve as it another business entity with an active Florida regi	s own Registered Agent. You must design	nate an individual or
The name and the Florida street address of the regi	istered agent are:	
Tracy a. M.	Name	
14/ K 14/th -	THECOLL	

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 605, F.S.

Registered Agent's Signature (REQUIRED)

Florida street address (P.O. Box NOT acceptable)

Palm Brach Gardens FL 334/18
City Zip

(CONTINUED)

Page 1 of 2

R" = Authorized Member ' = Manager MBL MBL	Tracy A. Miller 1405 1412 Terrace Paim Brach Garders Fl 3348
<u>lmbř</u>	TIACY A. Miller 1405 14M TErrace Paim Beach Gorders FI 3348
	1905 14th Terrace Palm Black Garders FI 3348
n BP	Paim Brach Garders FI 3348
n <i>BP</i>	Tall charles specialist to
n BP	
	Maurien K. Miller
	1405 14th Terrace
	Palm Beach gardens F1 33418
	9
	
	
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