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PICK-UP	WAIT	MAIL
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Certified Copjes	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

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FALLAHASSIE, BOOK

2019 OCT 29 PH 3: 4

COVER LETTER

	New Filing Section Division of Corporations	
SUBJEC	TKWAdvisors, LLC	
002020		of Limited Liability Company
The enclo	osed Articles of Organization and fe	e(s) are submitted for filing.
Please ret	turn all correspondence concerning t	his matter to the following:
	Karl L Fava	
		Name of Person
	Business Financial Consultant's,	Inc.
		Firm/Company
	1100 N. Telegraph Road	
		Address
	Dearborn, MI 48128	
	agardner@bfcinc.com	City/State and Zip Code
		used for future annual report notification)
For further	information concerning this matter,	please call:
	Amber Gardner	313 359-9358 at ()
	Name of Person	Area Code Daytime Telephone Number
Enclosed	is a check for the following amount	
\$125.001	Filing Fee \$130.00 Filing Fee Certificate of Stat	
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327	Street Address New Filing Section Division of Corporations Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

TKWAdvisors, LLC				
(Must contr	in the words "Limited	Liability Company, '	"L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street ad	dress of the principal o	office of the Limited	Liability Company is:	
Princip	al Office Address:		Mailing Address:	
12730 Sorrento Way Unit 204				
Bradenton, Florida 3	4211			
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a The name and the Florida street	cannot serve as its own active Florida registration address of the registered Timothy Wilson 12730 Sorrento Way Florida street address	n Registered Agent. You.) d agent are: Name , Unit 204 ss (P.O. Box NOT ac	You must designate an individual or:	2019 OCT 29 PM 3: 47
	Bradenton, FL 3421 City	State	Zip	
Having been named as registered of	I hereby accept the app	pointment as registere relating to the proper	above stated limited liability compan ed agent and agree to act in this capac and complete performance of my duti is provided for in Chapter 605, F.S	city. I

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