M14000004567

(Requestor's Name)
(Address)
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06/27/14--01034--001 **638.75

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S. YOUNG



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 1, 2014

CAMERON A CHALMERS 1428 CALICO LANE BLACKSBURG, VA 24060

SUBJECT: TECH TEEZ, L.L.C. Ref. Number: W14000027465

We have received your document for TECH TEEZ, 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):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$638.75.

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.

Shelia H Young Regulatory Specialist II

Letter Number: 214A00009295

COVER LETTER

	istration Section sion of Corporatio	ns		
SUBJECT:	TECH TEE	z, LLC.	ited Liability Company	
		Name of Lim	ited Liability Company	
				Transact Business in Florida," Certificate of bility company to transact business in Florida.
Please return	all correspondence	concerning this matter to the	ne following:	
	LAM	eron A. Chalmi	ERS Name of Person	the state of the s
		TECH TEEZ, LLC		
			Firm/Company	
	142	8 CALILO LANE		
			Address	
		BLACKS BURG UA	24%	
	- , ,, ,, ,		/State and Zip Code	
	tech	teez@amail.com	sed for future annual report no	
		E-mail address: (to be us	sed for future annual report no	otification)
For further in	formation concerning	g this matter, please call:		
c		almers	_ ** \	30 - 7707
	Name o	of Contact Person	Area Code	Daytime Telephone Number
Divi Regi P.O.	ILING ADDRESS: sion of Corporation istration Section Box 6327 ahassee, FL 32314	Divis Regis Clifto 2661	ion of Corporations stration Section Building Executive Center Circle hassee, FL 32301	
	s a check for the 1 125.00 Filing Fee	following amount: 文 \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee Certified Copy	& \$160.00 Filing Fee, Cartificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

40

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name o	of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
	TOP KNOT GOODS, L.L.C.	
(If name unavailable, c Liability Company," "	enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limit "L.L.C," or "LLC.")	ted
2 VIRGINIA .	MONTHOMERY COUNTY 3 45-2758100	
(Jurisdiction under company is organi	Mont6oMERY County 3. 45-2758100 the law of which foreign limited liability lized) (FEI number, if applicable)	
4	OCTOBER 1, 2013	
	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5	1035 WEST AVE #605	
	MIAM I BEACH, FL 33139 (Street Address of Principal Office)	
6.	TECH TEEZ, LLC	
· .		
	1428 CALICO LANE BLACKSBURG, VA 24060 (Mailing Address)	
7 The name ti	(Mailing Address)	
7. The name, ti	1428 CALICO LANE BLACKSBURG, VA 24060 (Mailing Address) itle or capacity and address of the person(s) who has/have authority to manage is/are:	
	(Mailing Address)	コ
CHARLES CH	(Mailing Address) itle or capacity and address of the person(s) who has/have authority to manage is/are:	
CHARLES CH NATQUE FR	(Mailing Address) itle or capacity and address of the person(s) who has/have authority to manage is/are: HALMERS - MEMBER [1428 CALICO LANE BLACKSBURG, UA 24060]	3
CHARLES CH NATQUE FR CAM CHALME	(Mailing Address) itle or capacity and address of the person(s) who has/have authority to manage is/are: IALMERS - MEMBER [1428 CALICO LANE BLACKSBURG, UA Z4060 ZEORICK - MEMBER [276 ISLAND BLUFF DRIVE MEMPHIS, TN 3810] ZES-MEMBER/REDISTERED AGENT VA [1428 CALICO LANE BLACKSBURG, VA]	_ 3 24
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CHARLES CH NATALIE FR CAM CHALME 8. Attached is an having custody of	(Mailing Address) itle or capacity and address of the person(s) who has/have authority to manage is/are: IALMERS - MEMBER [1428 CALICO LANE BLACKSBURG, UA ZHOGO ZEORICK - MEMBER [276 ISLAND BLUFF DRINE MEMPHIS, TN 3810] ZEORICK - MEMBER [276 ISLAND BLUFF DRINE MEMPHIS, TN 3810] TRES-MEMBER/REDINTERED AGENT VA [1428 (ALICO LANE BLACKSBURG, VA and correction of records in the jurisdiction under the law of which it is organized. (A photocopy is not	3 2.4
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CHARLES CH NATQUE FR CAM CHALME 8. Attached is an having custody of acceptable. If the must be submitted	(Mailing Address) itle or capacity and address of the person(s) who has/have authority to manage is/are: HALMERS - MEMBER [1428 CALICO LANE BLACKSBURG, UA 24060 REDRICK - MEMBER [276 ISLAND BLUFF DRIVE MEMPHIS, TN 3810] RES-MEMBER/REDITERED AGENT VA [1428 CALICO LANE BLACKSBURG, VA 30] In original certificate of existence, no more than 90 days old, duly authenticated by the office of records in the jurisdiction under the law of which it is organized. (A photocopy is not e certificate is in a foreign language, a translation of the certificate under oath of the translated)	Z.4 cial

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:
TECH TEEZ, LLC
If unavailable, the alternate to be used in the state of Florida is:
TOP KNOT GOODS, LLC
2. The name and the Florida street address of the registered agent and office are:
DAVID FEIN
(Name)
Blo 11th Street APT# 201 Florida Street Address (P.O. Box NOT ACCEPTABLE)
MIAMI BEACH FL 33139 City/State/Zip
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, Florida
Statutes. Signature)
\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

Commontorealth of Hirginia



State Corporation Commission

CERTIFICATE OF FACT

I Certify the Following from the Records of the Commission:

That TECH TEEZ, L.L.C. is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the date of its organization is July 12, 2011; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.

March 28, 2014

Signed and Sealed at Richmond on this Date: March 28, 2014

Joel H. Peck, Clerk of the Commission

