



MARC JOSEPH TILLY

License Number: RN9283063

Data As Of 12/22/2024

Profession	Registered Nurse
License	RN9283063
License Status	DECEASED/
Qualifications	Single-state License
License Expiration Date	7/31/2022
License Original Issue Date	09/18/2008
Address of Record	If further information is needed, please contact the Department of Health at (850) 488-0595.
Discipline on File	Yes
Public Complaint	Yes
Alerts	Enforcement Alert 8/11/2022 10:28:13 AM Emergency Restriction Order filed 08/11/2022.

Secondary Locations

No secondary locations found.

Discipline/Admin Action

Emergency Actions

Name	License	Profession	City	County	State	Case #	Action Taken	Action Date
TILLY, MARC	9283063	REGISTERED NURSE	JACKSONVILLE	DUVAL	FL	202224398	ERO ISSUED	08/11/2022

Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
TILLY, MARC JOSEPH	9283063	REGISTERED NURS	JACKSONVILLE	FL	201002258	OBLIGATION(S) SATISFIED
TILLY, MARC JOSEPH	9283063	REGISTERED NURS	JACKSONVILLE	FL	201819167	SUSPENSION

Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
TILLY, MARC JOSEPH	9283063	REGISTERED NURSE	JACKSONVILLE	FL	201819167	AC FILED
TILLY, MARC JOSEPH	9283063	REGISTERED NURSE	JACKSONVILLE	FL	201002258	AC FILED

If a link does not appear for the case number, we do not have a scanned copy of the final order available in our database. To obtain a paper copy, please contact Public Records by clicking the link below:

[Discipline Public Records Request](#)

You may also contact Public Records by telephone at (850) 245-4252, option 4 or by written correspondence at:
Division of Medical Quality Assurance
Public Records
4052 Bald Cypress Way, Bin C01

Tallahassee, FL 32399-3251

Please include the following:

1. Full name and license number of the practitioner;
2. Name and address where documents are to be sent; and
3. If you require certification of the documents, a \$25 fee will be charged, in addition to the duplicating charges. Certification of the requested records will not be done unless specifically requested. An invoice will be sent to you and payment will be expected within thirty days. Upon receipt of payment, material will be sent to you.

The information on this page is a secure, primary source for license verification provided by the Florida Department of Health, Division of Medical Quality Assurance. This website is maintained by Division staff and is updated immediately upon a change to our licensing and enforcement database.
