# LODOOO / LQ67 | demos & associates | 2760 SW 58th Street | Ocala FL 34474-5810 | City/State/Zip | Phone #

Office Use Only

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.			
•	(Corporation Name)	(Document #)	
2.		5000034907555	
	(Corporation Name)	(Document #) ***********************************	
3.			
4	(Corporation Name)	(Document #)	
4.	(Corporation Name)	(Document #)	
	□ Walk in □ Pick up time   □ Mail out □ Will wait	Certified Copy  Certificate of Status	
Ī	NEW FILINGS	AMENDMENTS SOOOQ34907555	
] ] [	Profit Not for Profit Limited Liability Domestication Other	Amendment *****25.00 *****25.00  Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger	
9	OTHER FILINGS	REGISTRATION/QUALIFICATION =	
[	Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other	



# FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 15, 2000

DEMOS & ASSOCIATES 2760 SW 58TH ST OCALA, FL 34474-5810

SUBJECT: KARE, LLC

Ref. Number: W00000029473

We have received your document for KARE, LLC and check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$25.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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) 487-6043.

Shawn Logan Document Specialist

Letter Number: 400A00063236

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

* *	
ARTICLE	C I - Name:

The name of the Limited Liability Company is:

KARE, LLC

### **ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

1329 SE 15th Street Ocala, FL 34471

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

 ANNA	М.	BLACI	Κ		
		ì	Vame		
 1329	SE	15th	Street		
Florida st	reet a	ddress (P.O. Box NOT		T acceptable)	
0cal:		`	FL	34471	
		City, St	tate, and 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 608, F.S..

Issa M Black
Registered Agent's Signature

### Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

China M Black	3 = 7.0	330
Signature of a member or an authorized representative of a member.		20
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury	ا از این	مراجعة المراجعة
that the facts stated herein are true.)		Ç
ANNA M. BLACK		23

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)