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## Caron Brown 5946 Painted Pony Dr. Jax, Fla. 32244

Daytime Phone (904) 381-4839 wk. Home Phone (904) 777-2891

O3 JAN 17 AM 8: 5:

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is: Brown's Adult Family Care Home, LLC

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

The mailing address and street address of the principal office of the Limited Liability Company is: 5946 Painted Pony Drive Jacksonville, FL 32244

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

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

Caron Brown	
Name	
5946 Painted Pony Drive	
Florida street address (P.O. Bo	x NOT acceptable)
Jacksonville, FL 32244	j_ 1
City, State, 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.

Carm Brown
Registered Agent's Signature

(An additional article must be added if an effective date is requested)

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Typed or printed name of signee

#### 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)

SECRETARY OF STATE