## 100000039117

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	<del></del>
Certified Copies		1
Special Instructions to F	-iling Officer:	
3/15	FI	LLC

Office Use Only



100067883911

13/15/66--0102:--01+ \*5100.88

06 Har 15 PH 1: 54

#### **COVER LETTER**

Registration Section

TO:

Division of Corporations						
SUBJECT: Healing Hands by Teresa, LLC						
(Name of Limited Liability Company)						
The enclosed Articles of Organization and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Teresa Prevatt						
(Name of Person)						
Healing Hands by Teresa,	<del></del>					
(Firm/Company)						
556 Remington Oaks Drive						
	(Address)					
Lake Mary, Florida 32746						
	ty/State and Zip Code)					
For further information concerning this matter, please call:						
Teresa Prevatt	at (407 \ 324-4414					
(Name of Person)	at (407 <u>)</u> 324-4414 (Area Code & Daytime Telephone Number)					
Enclosed is a check for the following amount:						
\$125.00 Filing Fee \$\times\$ \$130.00 Filing Fee \$\text{Certificate of Status}\$	\$\textstyle \textstyle					
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301					

# 06 MAR 15 PH 1:54

### ARTICLES OF ORGANIZATION OF HEALING HANDS BY TERESA, LLC

#### ARTICLE I - NAME

The name of the limited liability company is Healing Hands by Teresa, LLC.

#### ARTICLE II - ADDRESS

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

Principal C	Office	Address	: Mailing	Address:

556 Remington Oaks Drive 556 Remington Oaks Drive Lake Mary, Florida 32746 Lake Mary, Florida 32746

#### ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

Teresa Prevatt 556 Remington Oaks Drive Lake Mary, Florida 32746

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, Florida Statutes.

*Yllusa Yllustt)* Registered Agent's Signature

#### ARTICLE IV - MANAGER OR MANAGING MEMBER

The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address

MGRM (Managing Member)

Teresa Prevatt 556 Remington Oaks Drive Lake Mary, Florida 32746

#### ARTICLE V - EFFECTIVE DATE

The effective date of the company shall be the date of filing of these Articles of Organization.

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)

Teresa Prevatt

Typed or printed name of signee