

207000018011

Florida Department of State
 Division of Corporations
 Public Access System
 Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H07000040316 3)))



H070000403163ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
 Fax Number : (850)205-0383

From:

Account Name : A.A.A.T.T, CPA
 Account Number : I20000000192
 Phone : (407)298-3900
 Fax Number : (407)298-0660

FILED
 07 FEB 14 AM 10:59
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

RECEIVED
 07 FEB 14 AM 8:06
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

VICTORY ADULT FAMILY CARE HOME, LLC.

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

W07-7916

DB

Electronic Filing Menu

Corporate Filing Menu

Help

(H07000040316 3)

**ARTICLES OF ORGANIZATION
OF
VICTORY ADULT FAMILY CARE HOME, LLC.**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

ARTICLE I - NAME

The name of the limited liability company shall be **VICTORY ADULT FAMILY CARE HOME, LLC.**

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the company is **245 Oak Run Ct, Apopka, FL 32703.**

ARTICLE III - DURATION

The company shall commence its existence on the date these articles of organization are filed by the Florida Department of State or on another effective date if specified. The company's existence shall be perpetual, unless the company is dissolved earlier as provided in these articles of organization or in the regulations.

ARTICLE IV - PURPOSE

The Limited Liability Company may transact any and all lawful business for which a limited liability company may be organized under the Florida Limited Liability Company Act.

(H07000040316 3)

FILED
07 FEB 13 AM 10:59
SECRETARY OF STATE
TALLAHASSEE FLORIDA

(H07000040316 3)

ARTICLE V - REGISTERED OFFICE AND AGENT

The name and street address of the registered agent of the company in the state of Florida is **Temitope M. Balogun, 245 Oak Run Ct, Apopka, FL 32703.**

ARTICLE VI - ADMISSION OF NEW MEMBERS

Except as set forth in the regulations, no additional members shall be admitted to the company except with the unanimous written consent of all the members of the company and on the terms and conditions as shall be determined by all the members. A member may transfer his or her interest in the company as set forth in the regulations of the company, but the transferee shall have no right to participate in the management of the business and affairs of the company or become a member unless all of the members of the company other than the member proposing to dispose of his or her interest approve of the proposed transfer by written consent.

ARTICLE VII - MEMBER'S RIGHT TO CONTINUE BUSINESS

The company shall be dissolved on the death, bankruptcy, or dissolution of a member or manager, or on the occurrence of any other event that terminates the continued membership of a member in the company, unless the business of the company is continued by a majority vote of the remaining members.

ARTICLES VIII - MANAGEMENT

The company shall be managed by the members in accordance with regulations adopted by the members for the management of the business and affairs of the company. These regulations may contain any provisions for the regulation and management of the affairs of the company not inconsistent with law or these articles of organization. The names and address of the members of the company are:

<u>NAME</u>	<u>ADDRESS</u>
Temitope M. Balogun, MGRM	245 Oak Run Ct, Apopka, FL 32703
Rachelle Augustin Balogun, MGRM	245 Oak Run Ct, Apopka, FL 32703

FILED
07 FEB 14 AM 10:59
SECRETARY OF STATE
TALLAHASSEE FLORIDA

(H07000040316 3)

(H07000040316 3)

IN WITNESS WHEREOF, the undersigned organizer has made and subscribed these articles of organization at Orlando, Florida, on **February 13, 2007**.

TEMITOPE M. BALOGUN

Print Name

ACCEPTANCE BY REGISTERED AGENT

Having been named the Registered Agent and to accept service of process for **VICTORY HEALTH CARE PROVIDER, LLC**, the above stated limited liability company, at the place designated in the Articles of Organization; I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with all provisions of any statute relating to the proper and complete performance of my duties and I am familiar with and agree to accept the obligations of my position as Registered Agent as provided for in Chapter 608, Florida Statutes.


TEMITOPE M. BALOGUN / Registered Agent

02/13/07

Date

SECRETARY OF STATE
TALLAHASSEE FLORIDA

07 FEB 14 AM 10:59

FILED

(H07000040316 3)