

A1a Incorporation Service 13056752811  
**W09000050133**

Florida Department of State  
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To: Division of Corporations  
Fax Number : (950) 617-6383

From: Account Name : CSH SERVICES, LLC  
Account Number : I20070000160  
Phone : (800) 494-3124  
Fax Number : (561) 455-9885

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**CARE RELOCATORS, LLC**

Certificate of Status	0
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**EXAMINER**

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**ARTICLES OF ORGANIZATION FOR A  
FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

**ARTICLE I NAME**

The name of the Limited Liability Company is:

CARE RELOCATORS, LLC

**ARTICLE II ADDRESS**

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

17833 49TH STREET N  
LOXAHATCHEE, FLORIDA 33470**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE  
REGISTERED AGENT SIGNATURE**

The name and the Florida street address of the registered agent

A1A REGISTERED AGENT INC.  
5647 110TH AVENUE NORTH  
ROYAL PALM BEACH, FLORIDA 33411

Having been named as registered agent 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.

x Linia Phoebe TUDAMKE PRES 5/22/09  
A1A REGISTERED AGENT INC. / Registered Agent's signature

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**ARTICLE IV MANAGEMENT**

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

**ARTICLE V MEMBERS (optional)**

MANAGING MEMBER

JAKIMA MILLER

17833 49TH STREET N

LOXAHATCHEE, FL 33470

MANAGING MEMBER

ERIC DOWNING

12-14 ELM STREET

MONT CLAIR, NJ 07042

MANAGING MEMBER

BARBARA CLORAN

17151 30TH LANE N

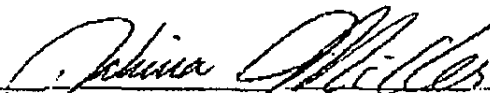
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X



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.

JAKIMA MILLER

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