# 109000063188

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



200157134542

06/30/09--01004--011 \*\*155.00



B. KOHR JUN 3 0 2009

**EXAMINER** 

#### **AUSLEY & MCMULLEN**

ATTORNEYS AND COUNSELORS AT LAW

227 SOUTH CALHOUN STREET
P.O. BOX 391 (ZIP 32302)
TALLAHASSEE, FLORIDA 32301
(850) 224-9115 FAX (850) 222-7560

June 29, 2009

VIA HAND DELIVE

Secretary of State's Office Division of Corporations 2661 Executive Center Circle West Tallahassee, Florida 32301

RE: Eldercare Services of Tallahassee, LLC

Dear Sir or Madam:

Enclosed for filing are Articles of Organization for the above-referenced company and our check for \$155.00. Also enclosed is an extra copy of the Articles for the certified copy. Please call Chris Vause at 425-5446 when the certified copy is ready to be picked-up.

Thank you for your assistance.

Sincerely,

Chris Vause

Secretary to Robert A. Pierce

/cv Enclosures

u:\adm\sec of state - articles-llc.doc

## ARTICLES OF ORGANIZATION OF ELDERCARE SERVICES OF TALLAHASSEE, LLC

The undersigned, pursuant to the provisions of Chapter 608, Florida Statutes, provides the following information for the purpose of forming a Limited Liability Company under the laws of the State of Florida.

#### ARTICLE 1. Name

The name of the Limited Liability Company is **ELDERCARE SERVICES OF TALLAHASSEE**, LLC.

#### ARTICLE 2. Address

The street and mailing address of the place of business in Florida is:

2507 Old St. Augustine Road Tallahassee, Florida 32301

### ARTICLE 3. Registered Agent and Registered Office

The name and Florida street address of the initial registered agent in Florida for the Limited Liability Company are:

#### Robert A. Pierce 227 South Calhoun Street

Tallahassee, Florida 32301-1805

Having been named as registered agent and as the person to accept service of process for the above-stated limited liability company at the place designated in these Articles, 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.

Robert A. Pierce, Registered Agent

Eldercare Services of Tallahassee, LLC
ARTICLES OF ORGANIZATION
Page 1 of 2

#### ARTICLE 4. Management

The Limited Liability Company shall be managed by its Member and is, therefore, a Member-managed company. The name and address of the Managing Member are:

Scott Brookins, MGRM

Š

2507 Old St. Augustine Road Tallahassee, Florida 32301

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this <u>29th</u> day of <u>June</u>, 2009.

IN ACCORDANCE WITH SECTION 608.408(3), FLORIDA STATUTES, THE EXECUTION OF THIS DOCUMENT CONSTITUTES AN AFFIRMATION UNDER PENALTIES OF PERJURY THAT THE FACTS STATED HEREIN ARE TRUE.

**ROBERT A. PIERCE** 

Authorized Representative of the Members

h:\tax\rap\brookins\articles eldercare.doc