# Electronic Articles of Organization For Florida Limited Liability Company

L10000029750 FILED 8:00 AM March 17, 2010 Sec. Of State nculligan

### **Article I**

The name of the Limited Liability Company is: COMPANION HOME CARE, LLC

#### **Article II**

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

439 LAZY Z LANE OAK HILL, FL. 32759

The mailing address of the Limited Liability Company is:

PO BOX 1263 NEW SMYRNA BEACH, FL. 32170

### **Article III**

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

#### **Article IV**

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

DORA J ASHMAN 439 LAZY Z LANE OAK HILL, FL. 32759

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.

Registered Agent Signature: DORA J ASHMAN

## **Article V**

The name and address of managing members/managers are:

Title: MGRM DORA J ASHMAN 439 LAZY Z LANE OAK HILL, FL. 32759

Signature of member or an authorized representative of a member

Signature: DORA JANE ASHMAN

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