

L11000085041

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600209773716

N. Culligan JUL 26 2011

**CHARLES P. HMIELEWSKI**

1385 RIVER RIDGE  
VERO BEACH, FL 32963  
(772) 234-4772

July 25, 2011

Neysa Culligan  
Florida Department of State  
Tallahassee, Florida

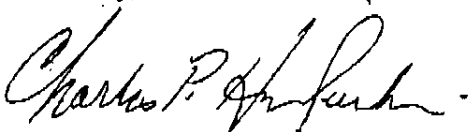
**RE: Affidavit – Island Home Care, LLC and Island Home Care, Inc.  
Tracking Number 800210347668  
PIN Number 7668**

Dear Ms. Culligan:

Please be advised that I serve as Principal to both of the above referenced entities. As such, I hereby acknowledge and agree to the similar nature of the names in registering in the State of Florida. Please continue to process my July 25, 2011 registration of Island Home Care, LLC.

Thank you for your assistance and let me know if you require anything further.

Sincerely,

A handwritten signature in cursive script, appearing to read "Charles P. Hmielewski".

Charles P. Hmielewski