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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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N. Cullen AUG - 5 2011

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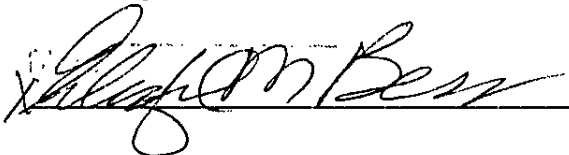
8/11/11

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, Florida 32314

SUBJECT: Private Care At Home LLC

I have enclosed the original and one copy of the Articles of Organization. You will also find my check for \$155.00 to cover the cost of the Filing Fees, Certified Copy of the Articles of Organization and Fee for Registered Agent Designation for the above named LLC.

Sincerely,



Please send accepted Articles of Organization to the following address:

Elizabeth Bess
1218 SE 47th St.
Cape Coral, FL. 33904

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I -Name:

The name of the Limited Liability Company is: Private Care At Home LLC

ARTICLE II -Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 1218 SE 47th St. Cape Coral, FL. 33904

ARTICLE III -Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: Elizabeth Bess, 4805 Sorrento Ct. #7, Cape Coral, FL. 33904

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 as provided for in Chapter 608, F.S.

Registered Agent's Signature



Article IV Manager(s) or Managing Member(s)

Title

MGRM

Name and Address

Elizabeth Bess
1218 SE 47th St.
Cape Coral, FL. 33904

Article V -Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager -managed company.

ARTICLE V: Effective Date

The effective date is: When Filed

X Signature

