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Florida Department of State  
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Effective Date

9-6-11

From:

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**FLORIDA LIMITED LIABILITY CO.**

**Helping Hands at Home LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

*Called  
correct spelling  
Ileana Cano Smith*

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

Helping Hands at Home LLC.

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

## ARTICLE II - Address:

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

Principal Office Address:Mailing Address:

801 Northpoint Parkway 801 Northpoint Parkway  
Suite #18 Suite #18  
West Palm Beach, FL 33407 West Palm Beach, FL 33407

## ARTICLE III - Registered Agent, Registered Office, &amp; Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Maurice H. Smith  
 Name  
801 Northpoint Parkway, #18  
 Florida street address (P.O. Box NOT acceptable)  
West Palm Beach FL 33407  
 City, State, and Zip

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.

Maurice H. Smith  
 Registered Agent's Signature (REQUIRED)

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**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**MGRMMaurice H. Smith  
801 Northpoint Parkway #18  
West Palm Beach, FL 33407MGRMEleona Cano Smith  
801 Northpoint Parkway #18  
West Palm Beach, FL 33407\_

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 9/6/11 (OPTIONAL)  
 (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**

Maurice H. Smith  
 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.)

Maurice H. Smith  
 Typed or printed name of signee

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

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**Filing Fees:**

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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