L13000090413

(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:				
<u>-</u>				
JUN 2 4 2013				
A. LUNT				
W13-31576				
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Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

May 31, 2013

LEE ANDREA KNAPP 229 PATRICK MILL CIR. PONTE VEDRA, FL 32082

SUBJECT: CURA SERVICES LLC Ref. Number: W13000031576

We have received your document for CURA SERVICES LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law does not allow a sole proprietorship to file a conversion. A sole proprietorship is a business owned and operated by one individual. As a sole proprietor, the one individual owner is responsible for making all of the business decisions and all of the debts of the business are considered to be the debts of the one individual owner, as well. The sole proprietorship may or may not conduct business under the one individual owner s legal name. Because the business and the individual are considered as one organization and need each other to co-exist from a legal perspective, a sole proprietorship is not considered a business entity and cannot, therefore, file a conversion under Florida law.

If your sole proprietorship is actually owned and operated by two or more individuals and those individuals serve in the capacity of a partner, your business may not be a sole proprietorship. Your business may meet the definition of a partnership in accordance with Chapter 620, Florida Statutes. Chapter 620, Florida Statutes, allows a partnership to file a conversion. However, the partnership must first file a statement of registration in accordance with section 620.8105, Florida Statutes.

We are enclosing a statement of registration should your business entity meet the criteria of a partnership and you wish to proceed with the conversion. Please note the fee to register a partnership is \$50. To proceed with the conversion, please correct your conversion documents to reflect your current business entity is a partnership and resubmit the conversion documents along with the enclosed registration statement and an additional fee of \$50.

This office strongly suggests that you seek legal advice concerning this matter.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 413A00013707

06/10/13

To Whom It May Concern,

Enclosed is my application for Articles of Organization for Florida Limited Liability Company for my business Cura Services dba Care Patrol of Jacksonville. As I had previous mailed in the incorrect form and paid the fee of \$155.00, I am requesting the balance of \$25 to be refunded to me.

Please make check payable to: Lee Andrea Knapp

Please mail to address: 229 Patrick Mill Circle

Ponte Vedra, Fl. 32082

For any questions, you may reach me @ LKnapp@carepatrol.com and 904-629-6019.

Best Regards,

Lee Andrea Knapp

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Cura Services, LLC	
Name of Limited Liability Company	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Lee Andrea Knapp	
Name of Person	
Cura Services dba Care Patrol of Jackson	ville
Firm/Company	2 2
229 Patrick Mill Circle	1013 JEN 2
Address	2 F
Ponte Vedra, FL 32082	
City/State and Zip Code	2 6
LKnapp@carepatrol.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Lee Andrea Knapp _{at (} 904) 629-6019	
Name of Person Area Code & Daytime Telephone Number	г
Enclosed is a check for the following amount:	
(additional copy is enclosed) Certified	e of Status &

Mailing Address
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Cura Services LLC (Must end with the words "Limited Liability Company	, the abbreviation "L.L.C.," or the designation "LLC.")
ARTICLE II - Address:	
The mailing address and street address of	f the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
229 Patrick Mill Circle	229 Patrick Mill Circle
Ponte Vedra, FL 32082	Ponte Vedra, FL 32082
	istered Office, & Registered Agent's Signature:
	vn Registered Agent. You must designate an individual or another (1)
The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of	vn Registered Agent. You must designate an individual or another of the registered agent are:
The Limited Liability Company cannot serve as its ov business entity with an active Florida registration.)	vn Registered Agent. You must designate an individual or another of the registered agent are:
The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of	of the registered agent are:
The Limited Liability Company cannot serve as its over business entity with an active Florida registration.) The name and the Florida street address of Lee Andrea King 229 Patrick M	of the registered agent are:
The Limited Liability Company cannot serve as its over business entity with an active Florida registration.) The name and the Florida street address of Lee Andrea King 229 Patrick M	of the registered agent are: napp Name Mill Circle

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..

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:	~ .3
"MGR" = Manager		
"MGRM" = Manag	ing Member	E - 77
MGR	Lan Andron Knoon	
IVIGIC	Lee Andrea Knapp	一
	229 Patrick Mill Circle	STEPRIOR ST
	Ponte Vedra, FL 32082	
		557

(Use attachment if	necessary)	
TICLE V: Effective	date, if other than the date of filing:	
TOME VI BROOM	date, if other than the date of filing:(OPTIONAL)	~ *
e effective date: 1) ca	nnot be prior to nor more than 90 days after the date t	his document is filed by
	of State; AND 2) must be the same as the effective da	
	n, if an effective date listed therein.)	
	·	
QUIRED SIGNATU	RE:	
Λ		
\//	\mathcal{A} $(1, 2)$	
Lil	Khalie Korp	
Signature of	a member or an authorized representative of a member.	
(In accordance with sec	tion 608.408(3), Florida Statutes, the execution of this document con	nstitutes an affirmation under
the penalties of perjury	that the facts stated herein are true. I am aware that any false inform	nation submitted in a
document to the Depar	tment of State constitutes a third degree felony as provided for in s.8	317.155, F.S.)
l oo And		
1 11 122 222 2	roa Knann	
Fee VIII	rea Knapp Typed or printed name of signee	
<u>Loc And</u>	rea Knapp Typed or printed name of signee	