

**Electronic Articles of Organization
For
Florida Limited Liability Company**

**L15000169553
FILED 8:00 AM
October 05, 2015
Sec. Of State
wapainter**

Article I

The name of the Limited Liability Company is:

KATYS KARE, LLC

Article II

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

7519 BROOK HAVEN CT
TAMPA, FL. US 33634

The mailing address of the Limited Liability Company is:

7519 BROOK HAVEN CT
TAMPA, FL. US 33634

Article III

Other provisions, if any:

HOME HEALTH CARE/BATHING/MEAL PREP/GROOMING/ERRAND

Article IV

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

SANDRA LAFOE
7519 BROOK HAVEN CT
TAMPA, FL. 33634

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: SANDRA LAFOE

Article V

The name and address of person(s) authorized to manage LLC:

Title: MGRM
KATLIN LAFOE
7519 BROOK HAVEN CT
TAMPA, FL. 33634 US

Title: MGRM
SANDRA LAFOE
7519 BROOK HAVEN CT
TAMPA, FL. 33634 US

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Article VI

The effective date for this Limited Liability Company shall be:

10/02/2015

Signature of member or an authorized representative

Electronic Signature: SANDRA LAFOE

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.