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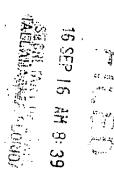
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COVER LETTER

	egistration Section vision of Corporations			•	. ,
SUBJECT:	Alpha Care		••		
object.		ame of Limited Liabili	ty Company	,	
			· ·		
The enclose	ed Articles of Organization ar	nd fee(s) are submitted	for filing.		
lease retur	rn all correspondence concerr	ning this matter to the f	allowing.		•
10120 1014	oonooponaana oonoon	mig and matter to the r		•	•
	Amr Ibrahim	·			
		Name of	Person		
		·	•	. ,	•
	Alpha Care	•		ŕ	
		Firm/Co	npany		
	600 Starkey Road apt201	119	·	·	
		Addre	ess		
	Largo FL 33771				
. a	alphacarefl@gmail.com	City/State and	l Zip Code		
	E-mail address:	(to be used for future a	nnual report notif	ication)	
r further in	formation concerning this ma	atter, please call:			
	Amr Ibrahim	954 at (53 6-0966		
	Name of Person	Area Code	Daytime Telep	hone Number	
			:	•	•
inclosed is	a check for the following am	ount:			
125.00 Fil	ling Fee \$130.00 Filin Certificate of	Status Certific	0 Filing Fee & ed Copy al copy is enclosed	i) Certified C	of Status &
	Mailing Address		Street Address		
	New Filing Section	•	New Filing Section	n	

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

4.

The name of the Limited Liability	ty Company is:					
Alpha Care LLC					· •	`•
	with the words "Limite	ed Liability Co	mpany, "L.I	C.," or "LLC.")	· · · · · · · · · · · · · · · · · · ·	
ARTICLE II - Address: The mailing address and street a	ddress of the principal	office of the L	imited Liabi	lity Company is:	•	
<u>Princip</u>	oal Office Address:	. :	,	Mailing Ac	<u>ldress</u> :	*
600 Starkey Road ap Largo, FL 33771	01201	·	600 Stark Largo, FL	ey Road apt201	· · · · · · · · · · · · · · · · · · ·	
ARTICLE III - Registered Age The Limited Liability Company another business entity with an a The name and the Florida street	y cannot serve as its ow active Florida registrat	n Registered A			individual or	
	•	Name				
	600 Starkey Road a					
	Florida street addre	ess (P.O. Box I	NOT accepta	ible)		
	Largo	FL	·	33771		
AL V-	City	- State	•	Zip		
aving been named as registered of lace designated in this certificate orther agree to comply with the pi or familiar with and accept the ob	, I hereby accept the approvisions of all statutes bligations of my position	pointment as relating to the	egistered age proper and c agent as pro	ent and agree to a complete perform vided for in Chap	ict in this capaci ance of my dutie	ty. 1
		(CONTIN	UED)			の名

Page 1 of 2

T t

.....

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager AMBR/MGR	Ahmed Ibrahim
	600 Starkey Road apt201
	Largo, FL 33771
AMBR/MG-R	Amr Ibrahim
	600 Starker Road Apt 201
	Largo FL 33771
	•
	-
(Use attachment if necessary)	
	ne date of filing: <u>September 14, 2016</u> (OPTIONAL)
ective date is listed, the date must of filing.) the date inserted in this block does nent's effective date on the Depart	be specific and cannot be more than five business days prior to or 90 days not meet the applicable statutory filing requirements, this date will not be
ctive date is listed, the date must of filing.) the date inserted in this block does ment's effective date on the Depart E VI: Other provisions, if any. REOURED SIGNATURE: Signature of This document is a large and aware that an	s not meet the applicable statutory filing requirements, this date will not be timent of State's records. If a member or an authorized representative of a member. executed in accordance with section 605.0203 (1) (b), Florida Statutes. By false information submitted in a document to the Department of State.
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