180001009

(Red	questor's Name)	
(Add	dress)	
`	·	
(Add	dress)	
/Cih	y/State/Zip/Phon	- 1 0
(City	y/State/Zip/Pnon	e # <i>)</i>
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	1
Certified Copies	_ Certificate:	s of Status
Special Instructions to I	Filing Officer:	

Office Use Only



900312515089

05/02/18--01017--010 **125.00

ÜΠ

D O'KEEFE MAY - 8 2018

Terence Matthews, Chartered

5190 26th Street West, Suite D Bradenton Florida 34207-2200

Telephone: (941) 755 – 8583

Primary E: tmlaw.office@verizon.net

Facsimile: (941) 753 – 8479

Secondary E: tmlaw.lisa@gmail.com Website: www.tmatthewslaw.com

April 26, 2018

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

SUBJECT: CUMMINGS HOME HEALTH CARE, LLC

To Whom It May Concern:

Please find enclosed the following items for the above-named company:

- 1. An original and a duplicate copy of the Articles of Organization of this proposed company and the Acceptance of the Registered Agent.
- 2. FIRM Check (# \(\int \frac{7200}{}\) for \$125.00 to cover the filing fee and resident agent fee.

At this time, no certified copies are needed.

Lica a Santos Q

If you have any questions or require further information, please contact our office.

Sincerely,

Lisa A. Sanford, FRP

Paralegal for Terence Matthews, Esq.

Enclosures

COVER LETTER

TO:	New Filing Section Division of Corporations			
•	CUMMINGS HOME HEALTH CARE, LLC			
SUB	Name of Limited Liability Company			
The	enclosed Articles of Organization and fee(s) are submitted for filing.			
Plea	e return all correspondence concerning this matter to the following:			
	SARAH LYNN CUMMINGS			
	Name of Person			
	CUMMINGS HOME HEALTH CARE, LLC			
	Fîrm/Company			
	403 50TH AVENUE TERRACE WEST			
	Address			
	BRADENTON, FL 34207			
	City/State and Zip Code SLCUMMINGS@AOL.COM			
	E-mail address: (to be used for future annual report notification)			
For fu	ther information concerning this matter, please call:			
	SARAH LYNN CUMMINGS 941 536-5360			
	Name of Person Area Code Daytime Telephone Nun	nber		
Encl	osed is a check for the following amount:			
\$12.	Certificate of Status — Certified Copy —	160.00 Filing Fee, certificate of Status & certified Copy litional copy is enclosed)		
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, Fl. 323142661 Executive Center Circ	sle		

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION

OF

CUMMINGS HOME HEALTH CARE, LLC

A FLORIDA LIMITED LIABILITY COMPANY

18 MAY -2 AN 7: 51 SECOLOR SEET LOUIS

ARTICLE I--NAME and PRINCIPAL PLACE OF BUSINESS

The name of this Limited Liability Company is CUMMINGS HOME HEALTH CARE, LLC, and its principal place of business is 403 50th Ave. Ter. West, Bradenton. Florida, 34207, and its mailing address is 403 50th Ave. Ter. West, Bradenton, Florida.

ARTICLE II—DURATION AND CORPORATE EXISTENCE

This Limited Liability Company shall exist perpetually. The company existence shall commence upon the execution of these articles.

ARTICLE III--PURPOSE

This Limited Liability Company is organized for the purpose of any and all lawful business for which Limited Liability Companies may be formed under the Florida Limited Liability Companies Act Chapter 605 of the Florida Statutes.

ARTICLE IV-POWERS

This Limited Liability Company shall have all of the powers enumerated in the Florida Limited Liability Companies Act Chapter 605 of the Florida Statues.

ARTICLE V--INITIAL OFFICE AND RESIDENT AGENT

The street address of the initial registered office of this Limited Liability Company is 403 50th Ave. Ter. West, Bradenton, Florida 34207, and the name of the initial registered agent of this Limited Liability Company at that address is TERENCE MATTHEWS.

ARTICLE VI—MANAGER(S) OR MANAGING MEMBERS

The names and addresses of the persons who are to serve as Managers or Managing members are as follows:

Title:	Name and Address
MGMR = Managing Member	
MGMR	Aquitaine Asset Management, LLC A Florida Limited Liability Company 5400 34th Street West 4-F Bradenton, Florida 34210
MGMR	Sarah Lynn Cummings 403 50th Ave. Ter. West. Bradenton. Florida 34207

ARTICLE VII-INDEMNIFICATION

The Company shall indemnify any manager or managing member or any former managing member to the full extent permitted by law.

ARTICLE VIII-AMENDMENT

This Limited Liability Company reserves the right to amend or repeal any provision contained in these Articles of Organization, and any amendment hereto, and any right conferred on the members is subject to this reservation. The procedure for amendment of these articles shall be by a vote of the majority of the members of the Company and as provided in Florida Statute 605.0202.

IN WITNESS WHEREOF, the undersigned subscribers have executed these Articles of Organization, this $\frac{27\%}{2018}$ day of April . 2018.

Sarah Lynn Cummings MGMR

STATE OF FLORIDA COUNTY OF MANATEE

Before me, a notary public authorized to take acknowledgment in the state and county set forth above, personally appeared Sarah Lynn Cummings, known to me and known by me to be the persons signing these Articles of Incorporation, and acknowledged before me that he executed these Articles of Incorporation freely.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the state and county aforesaid, this 2 / day of 100

LISA A. SANFORD MY COMMISSION # GG 128522 EXPIRES: November 26, 2021

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

Pursuant to Section 605.0113, Florida Statutes, the following is submitted: that CUMMINGS HOME HEALTH CARE, LLC, A Florida Limited Liability Company desiring to organize under the laws of the State of Florida with its principal office, as indicated in the Articles of Organization, in the City of Bradenton, County of Manatee, State of Florida, has named — TERENCE MATTHEWS of 5190 26th Street West, Suite D. Bradenton, Florida, 34207, as its agent to accept service of process within the State of Florida.

Sarah Lynn Cummings, MGRM

ACKNOWLEDGEMENT.

Having been named as registered agent to accept service of process for the above named Limited Liability Company, at the place designated in this Certificate. I hereby accept such appointment and agree to act in this capacity, and agree to comply with the provision of law relating to keeping said office open, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605. Florida Statutes.

Terence Matthews, Registered Agent

AT -2 AH 7: