

L1900011722

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H19000144334 3)))



H190001443343ABC5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : HILL WARD HENDERSON
Account Number : 072100000520
Phone : (813)221-3900
Fax Number : (813)200-5995

STATE OF FLORIDA
DIVISION OF CORPORATIONS

19 MAY -1 AM 10:27

FILED

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA LIMITED LIABILITY CO.

Alliant Care, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

2019 MAY -1 AM 11:00

MAY -2 2019

Electronic Filing Menu

Corporate Filing Menu

Help

C

((H19000144334 3)))

**ARTICLES OF ORGANIZATION
OF
ALLIANT CARE, LLC**

**ARTICLE I
NAME**

The name of the Company shall be: **ALLIANT CARE, LLC**

**ARTICLE II
ADDRESS AND PLACE OF BUSINESS**

The mailing and street address for the Company's principal office is 10730 N 56th Street, Suite 210, Temple Terrace, Florida 33617.

**ARTICLE III
REGISTERED OFFICE AND REGISTERED AGENT**

The street address of the Company's initial registered office in Florida is 10730 N 56th Street, Suite 210, Temple Terrace, Florida 33617, and the name of its initial registered agent is Khalid Sakr. The Company may change its registered office or its registered agent or both by filing with the Department of State of the State of Florida a statement complying with Chapter 605, Florida Statutes.

**ARTICLE IV
ACKNOWLEDGMENT**

The members of the Company, through their undersigned authorized representative, do hereby certify that the foregoing constitutes the proposed Articles of Organization of Alliant Care, LLC. These Articles of Organization may be amended from time to time by consent of the members holding a majority of the voting interests of the Company, or otherwise in the manner now or hereafter prescribed in the Company's Operating Agreement, consistent with the laws of the State of Florida.

**ARTICLE V
MANAGEMENT**

The Company will be a manager-managed limited liability company under the Act. The name and address of the person initially authorized to manage the Company are as follows:

Khalid Sakr
10730 N 56th Street, Suite 210
Temple Terrace, Florida 33617

((H19000144334 3)))

FILED
19 MAY - 1 10:27
CLERK OF THE COURT
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

((H19000144334 3)))

ARTICLES OF ORGANIZATION
OF ALLIANT CARE, LLC

PAGE 2


IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization
this 29 day of April 2019.


Khalid Sakr, Authorized Agent

ACCEPTANCE BY REGISTERED AGENT

Having been appointed the registered agent of Alliant Care, L.L.C, the undersigned accepts
such an appointment, agrees to act in such capacity and accepts the obligations proposed by
Chapter 605, Florida Statutes.

EXECUTED this 29 day of April 2019.


Khalid Sakr

FILED
19 MAY -1 AM 10:27
CLERK OF STATE
TALLAHASSEE FL 32301