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DATE: 9/4/19

NAME: CARE TAKEOVER HOME LLC

TYPE OF FILING: ARTICLES

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AUTHORIZATION: ABBIE/PAUL HODGE

## ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I: NAME** 

The name of the Limited Liability Company is:

Care Takeover Home LLC

**ARTICLE II: Address** 

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

1991 Heasley Road

Englewood, FL 34223

### ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

A1A Registered Agent Inc.

5647 110th Ave North

Royal Palm Beach, FL 33411

Having been named as registered agent 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 605, F.S.

A1A Registered Agent Inc.

/ Registered Agent's Signature

#### PAGE 2 Care Takeover Home LLC

AMBR: Meggie Hoogenboom

1991 Heasley Road

Englewood, FL 34223

AMBR: Leon Hoogenboom

1991 Heasley Road

Englewood, FL 34223

AMBR: Monique Hoogenboom-van der Noort

1991 Heasley Road

Englewood, FL 34223

ARTICLE V: ANY	OTHER PROVISION	OR PURPOSE OF	THE LIMITED	<u>LIABILITY</u>
<u>COMPANY</u>				

×		Meggie Hoogenboom
	<u>(17)</u>	Meggie i loogenboon

Signature of a member or an authorized representative of a member

(In accordance with section 605.0203 (1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any 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.)