22000168147

(Requestor's Name)		
(Address)		
(Addison		
(Address)		
(Cit	y/State/Zip/Phone #)	
PICK-UP	MAIT	MAIL
(Business Entity Name)		
ua,	siness chuty ivaine)	
(Document Number)		
Certified Copies	_ Certificates of	Status
Special Instructions to Filing Officer:		
		· ·
		ţ
		1
		į.
		Į.
		Į
		

Office Use Only



900384401209

04/01/22--01017--011 **155.00

FILED
2022 APR-1 PH 4: 57

Stacy Frank Frank Family Care, LLC 440 11th Ave NE St Petersburg, FL 33701

March 22, 2022

Secretary of State Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Frank Family Care, LLC

Dear Sir or Madam:

Enclosed please find the original and one copy of Articles of Organization, together with a check in the amount of \$155.00. This represents the cost of the Filing Fees, Certified Copy of Articles of Organization and Fee for Registered Agent Designation for the abovenamed organization.

The organization's email address shall be ssingsone@gmail.com.

Very truly yours,

Stacy Frank

Frank Family Care, LLC

Enclosures

ARTICLES OF ORGANIZATION

of

Frank Family Care, LLC

The undersigned subscriber to these Articles of Organization, a natural person competent to contract, hereby forms a limited liability company under the laws of the State of Florida.

ARTICLE I - ORGANIZATION NAME

The name of the organization is Frank Family Care, LLC.

ARTICLE II - DURATION

The limited liability company shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The limited liability company is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida, and to be afforded all the protections of the laws of the State of Florida afforded to limited liability companies.

ARTICLE IV - ORGANIZATION OFFICE

The organization's principal office address shall be as follows:

440 11th Ave NE St Petersburg, FL 33701

The organization's mailing address shall be as follows:

440 11th Ave NE St Petersburg, FL 33701 2022 APR - 1 PM 4: 57
SECRETARY OF STATE
AND AHASSEE, FLORIDA

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the Initial Registered Office and Agent of this Organization is:

Stacy Frank 440 11th Ave NE St Petersburg, FL 33701

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 as provided for in Chapter 605, F.S.

Stacy/Frank, Registered Agent

ARTICLE VI - MANAGÉRS

This organization shall have two (2) managers initially. The number of managers may be either increased or diminished from time to time by the By-Laws but shall never be less than one (1). The names and addresses of the initial manager of the organization are as follows:

Stacy Frank 440 11th Ave NE St Petersburg, FL 33701

Michele Steinberg 440 11th Ave NE St Petersburg, FL 33701 SLORUJARY OF STATE

FILED

ARTICLE VII - SIGNER

The name and address of the person signing these Articles of Organization is as follows:

Stacy Frank 440 11th Ave NE St Petersburg, FL 33701

ARTICLE VIII - MANAGEMENT

The Limited Liability Company is to be managed by one or more managers who are also members and is, therefore, a member – managed company.

Organization this ____ day of March, 2022.

Stacy Frank

STATE OF FLORIDA

COUNTY OF PINELLAS

BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared Stacy Frank, known to me to be the person who executed the foregoing Articles of Organization, or who presented FLORIDA DL. KILLIVIC as identification, and who acknowledged before me that he executed these Articles of Organization.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this <u>19</u> day of March, 2022.

Notary Public, State of Florida at Large

My Commission Expires:

Ny Commi Expires | August 5, 2024 | No. HH 025311