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| (Requestor's Name) |
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| (Address) |
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| (Address) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| (0) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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SECRETARY OF STATE

COVER LETTER

| TO: New Filing Section Division of Corporation | ons | |
|---|---|-------|
| SUBJECT: Core | From the Heat Home Core Senices (Name of Limited Liability Company | 10 |
| The enclosed Articles of Organiz | ization and fec(s) are submitted for filing. | |
| Please return all correspondence | e concerning this matter to the following: | |
| | Name of Person | |
| _ Care- | from the Heart Home Care Services L | - ۱۰ |
| 69 | 17 Satheat 3rd Street Address | |
| E-mail a | Mulbery Funda 33860 City/State and Zip Code Turing bayran 896 gmail. CCM address: (to be used for future annual report notification) | |
| For further information concerning | ig this matter, please call: | |
| Name of Per Enclosed is a check for the follow | 29 SSEE | FILED |
| | (additional copy is enclosed) (additional copy is enclosed) | |
| Mailing Address New Filing Sectors Division of Cotton P.O. Box 6327 | rection New Filing Section Division Orporations The Centre of Tallahassee | |

Tallahassee, FL 32314

Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Walling Address:

1097 Swheart 3rd Street

Mulbery, Flanda 38760

Mulbery, Flanda 38760

Mulbery, Flanda 38760

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

697 Swtheast 3rd Street

Florida street address (P.O. Box NOT acceptable)

Mulbery Honda 33860 City State Zip

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

7 1 L E D 22 AH 2:

| Title: | Name and Address: |
|---|--|
| "AMBR" = Authorized Member "MGR" = Manager MCPQUE | Juna Bauzan 1975 Sutheast 3rd Street Mulberry Handu 33860 |
| | |
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| | |
| If an effective date is listed, the date must he date of filing.) | to date of filing: August August (OPTIONAL) be specific and cannot be more than five business days prior to or 90 days at the not meet the applicable statutory filing requirements, this date will not be listed |
| the document's effective date on the Depart | |
| ARTICLE VI: Other provisions, if any. | |
| | |
| REQUIRED SIGNATURE: | na baikin Es 2 |
| Signature of This document is of I am aware that an | Ta member or an authorized representative of a member : Resecuted in accordance with section 605.0203 (1) (b), Florida Statutes. The secuted in accordance with section 605.0203 (1) (b), Florida Statutes. The secuted in accordance with section 605.0203 (1) (b), Florida Statutes. The secuted in accordance with section 605.0203 (1) (b), Florida Statutes. The secuted in accordance with section 605.0203 (1) (b), Florida Statutes. |
| | Typed or printed name of signee |
| | ryped of printed fiame of signee $2 - \omega$ |

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent