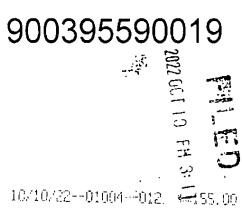
	(Requestor's Name)
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PICK-UP	WAIT MAIL
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	(Business Entity Name)
<del></del>	(Document Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:

Office Use Only





# Nancy Krause Krause Family Care, LLC 440 11<sup>th</sup> Ave NE St Petersburg, FL 33701

October 3, 2022

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

Re: Krause 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 floridaproperty (@hotmail.com

Very truly yours,

Nancy Krause

Krause Family Care, LLC

**Enclosures** 

check stapled here

### ARTICLES OF ORGANIZATION

of

## Krause 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 Krause 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.

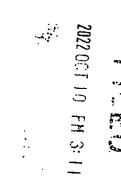
#### **ARTICLE IV - ORGANIZATION OFFICE**

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

522 Pinellas Bayway Unit 210 Tierra Verde, FL 33715

The organization's mailing address shall be as follows:

522 Pinellas Bayway Unit 210 Tierra Verde, FL 33715



# 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:

Nancy Krause 522 Pinellas Bayway Unit 210 Tierra Verde, FL 33715

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.

Nancy Krause, Registered Agent

#### **ARTICLE VI - MANAGERS**

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:

Nancy Krause 522 Pinellas Bayway Unit 210 Tierra Verde, FL 33715

Uwe Krause 522 Pinellas Bayway Unit 210 Tierra Verde, FL 33715

#### **ARTICLE VII - SIGNER**

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

Nancy Krause 522 Pinellas Bayway Unit 210 Tierra Verde, FL 33715

#### **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.

				undersigned		has	executed	these	Articles	of
Organi	ization	this $3$ da	y of	October, 2022	2.					
1.		1/								
<b>Y/W</b>	MU	Klause	·	_						
Nancy	Verlier				_					

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 Nancy Krause, known to me to be the person who executed the foregoing Articles of Organization, or who presented as identification, and who acknowledged before me that she executed these Articles of Organization.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this \_\_\_\_\_ day of October, 2022.

Notary Public, State of Florida at Large

My Commission Expires: