

L24000393/52

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(Address)

(Address)

(City/State/Zip/Phone #)

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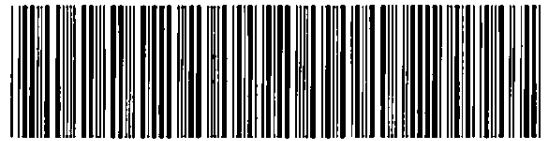
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TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 13, 2024

THERESA JORDAN  
13 ALAN A DOLE DR  
PENSACOLA, FL 32506 US

SUBJECT: JORDAN'S IN HOME HEALTHCARE  
Ref. Number: W24000113799

We have received your document for JORDAN'S IN HOME HEALTHCARE and check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable. Please amend your document accordingly.

The effective date is not acceptable since it is not within five working days of the date of receipt.

If you have any further questions concerning your document, please call (850) 245-6052.

Tabitha J Howell  
Regulatory Specialist II  
New Filings Section

Letter Number: 224A00017921

COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: JORDAN'S IN Home Healthcare  
Name of Limited Liability Company

The enclosed Articles of Organization and fees(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Theresa JORDAN  
Name of Person

JORDAN'S IN Home Healthcare  
Firm/Company

13 Alan A Dale Dr.  
Address

Pensacola Fla. 32506  
City/State and Zip Code

theresaduck1962@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Theresa JORDAN at ( 850 ) 426-2400  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☒ \$160.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

Mailing Address

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address

New Filing Section Division  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

JORDAN'S IN Home Healthcare LLC

(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:

13 Alan A Dale Dr.  
Pensacola FLA. 32506

Mailing Address:

13 Alan A Dale Dr.  
Pensacola FLA. 32506

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:

Theresa JORDAN

Name

13 Alan A. Dale Dr.

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

Pensacola FLA. 32506

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.*

Theresa Jordan

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

**Name and Address:**

Theresa Jordan  
13014 N Dale Dr  
Pensacola FL 32506

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: July 29, 2024 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**

Theresa Jordan

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.  
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.

Theresa Jordan

Typed or printed name of signee

**Filing Fees:**

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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