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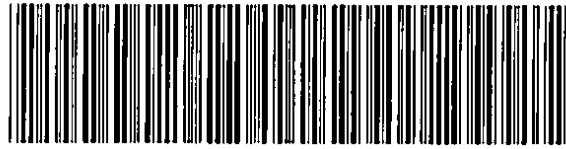
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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: OrganiCare Nature's Science, LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Valerye Rowe
Name of Person

OrganiCare Nature's Science, LLC
Firm/Company

3900 Drossett Dr, Ste G
Address

Austin, TX 78744
City/State and Zip Code

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

For further information concerning this matter, please call:

<u>Valerye Rowe</u>	512	401-3572
Name of Contact Person	at (_____)	Daytime Telephone Number
	Area Code	

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee & Certified Copy | <input type="checkbox"/> \$160.00 Filing Fee, Certificate of Status & Certified Copy |
|---|--|---|--|

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0602, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. OrgenCare Nature's Science, LLC
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C." or "LLC")

(If name unavailable under another name accepted for the purpose of transacting business in Florida, the alternate name must include "Limited Liability Company," "L.L.C." or "LLC.")

2. Texas 81-1251359
(State of incorporation) (Federal Tax Identification Number)

4. 3900 Drossett Dr, Ste G
(Address of principal office in the United States)

5. Austin, TX 78744 3900 Drossett Dr, Ste G
(Street Address, Principal Office) (Main Office)

7. Name and street address of Florida registered agent (P.O. Box NOT acceptable)
Name: Republic Registered Agent LLC
Office Address: 1150 NW 72nd Ave Tower 1, Ste 455
Miami 33126
Florida (Zip Code)

Registered agent's acceptance:
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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

06/26/24 Lovette Dobson

06/26/24 11:03:12

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: Name and Address:

Manager Name: Caroline Goodner

Member Address: 403 Graciosa Cove

Authorized Austin, TX 78746

Person _____

Other _____ Other _____

Title or Capacity: Name and Address:

Manager Name: _____

Member Address: _____

Authorized _____

Person _____

Other _____ Other _____

Manager Name: _____

Member Address: _____

Authorized _____

Person _____

Other _____ Other _____

Manager Name: _____

Member Address: _____

Authorized _____

Person _____

Other _____ Other _____

Manager Name: _____

Member Address: _____

Authorized _____

Person _____

Other _____ Other _____

Manager Name: _____

Member Address: _____

Authorized _____

Person _____

Other _____ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. 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.

Valerye Rowe

signature of an authorized person

Valerye Rowe

Typed or printed name of signer



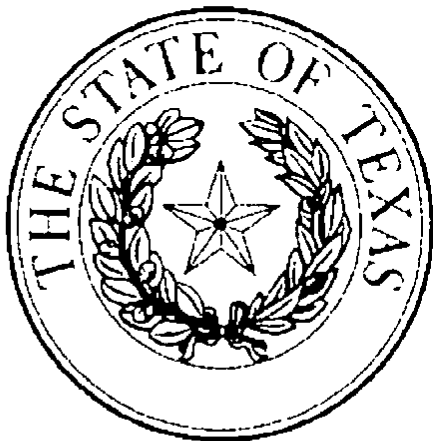
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Organicare Nature's Science, LLC (file number 802330320), a Domestic Limited Liability Company (LLC), was filed in this office on November 10, 2015.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on May 09, 2024.



A handwritten signature in black ink that reads "Jane Nelson".

Jane Nelson
Secretary of State