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Account Name : BAKER & HOSTETLER LLP
Account Number : I19990000077
Phone : (407)649-4043
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DIVISION OF CORPORATIONS

LIMITED LIABILITY COMPANY

First Care Winter Haven, LLC

Certificate of Status	1
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ARTICLES OF ORGANIZATION

OF

FIRST CARE WINTER HAVEN, LLC

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I

Name and Duration

The name of this Limited Liability Company is FIRST CARE WINTER HAVEN, LLC (hereinafter referred to as the "Company"). The duration of the Company shall commence upon the filing of these Articles of Organization and shall be perpetual.

ARTICLE II

Principal Office

The mailing address and street address of the principal office of the Company is 2233 Mallory Circle, Haines City, FL, 33844, or such other place as the Managers of the Company may determine from time to time.

ARTICLE III

Registered Office and Agent

The address of the registered office of the Company in the State of Florida is 2233 Mallory Circle, Haines City, FL 33844. The name of the registered agent at such address is James K. Lee.

ARTICLE IV

Manager-Managed Company

The Company is to be managed by Managers.

DATED as of the 17th day of October, 2004.

James K. Lee, Authorized Agent

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Florida Statutes Section 608.415, FIRST CARE WINTER HAVEN, LLC submits the following statement in designating the registered office/registered agent, in the State of Florida:

1. The name of the limited liability company is FIRST CARE WINTER HAVEN, LLC.

2. The name and address of the registered agent and office is: James K. Lee, 2233 Mallory Circle, Haines City, FL 33844.

Having been named as registered agent and to accept service of process for the above-named limited liability company at the place designated in this certificate, the undersigned, by and through its duly elected officer, hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accepts the obligations of the position as registered agent.

Dated: October 17th, 2004.

James K. Lee

Fax Audit #: