

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L13000095494  
FILED 8:00 AM  
July 03, 2013  
Sec. Of State  
stoner

**Article I**

The name of the Limited Liability Company is:  
TOTAL SOLUTIONS HEALTH CARE, L.L.C.

**Article II**

The street address of the principal office of the Limited Liability Company is:  
4631 NW 74TH AVE  
LAUDERHILL,, FL. US 33319

The mailing address of the Limited Liability Company is:  
P.O. BOX 190592  
LAUDERHILL, FL. US 33319

**Article III**

The purpose for which this Limited Liability Company is organized is:  
TO PROVIDE CARE TO PERSONS WITH DISABILITIES.

**Article IV**

The name and Florida street address of the registered agent is:  
LUVENIA ALLEN DR.  
4631 NW 74TH AVE  
LAUDERHILL, FL. 33319

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.

Registered Agent Signature: DR. LUVENIA ALLEN

## Article V

The name and address of managing members/managers are:

Title: MGR  
JAMES DAVIS  
7800 COLONY CIRCLE SOUTH APT 109  
TAMARAC, FL. 33321 US

Title: MGR  
DANENE GARLAND  
3831 NW 21 .ST APT. 202  
LAUDERDALE LAKES, FL. 33311 US

Title: MGR  
CHARLENE GREENE  
641 RIDGEWOOD ST.  
ALTAMONTE SPRINGS, FL. 32701 US

Title: MGR  
ILLAI DAVENPORT/HALL  
2821 SW 4TH PL  
FT. LAUDERDALE, FL. 33312 US

Title: MGR  
SAMUEL KELLY  
2450 WEST OAKLAND PARK  
OAKLAND, PARK, FL. 33311 US

## Article VI

The effective date for this Limited Liability Company shall be:

07/03/2013

Signature of member or an authorized representative of a member

Electronic Signature: DR.LUVENIA ALLEN

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

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