

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

L08000062846  
FILED 8:00 AM  
June 26, 2008  
Sec. Of State  
jbryan

**Article I**

The name of the Limited Liability Company is:  
PLATINUM HOUSE CARE SERVICES LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
4685 LAFRANCE AVENUE  
NORTH PORT, FL. 34286

The mailing address of the Limited Liability Company is:  
4685 LAFRANCE AVENUE  
NORTH PORT, FL. 34286

**Article III**

The purpose for which this Limited Liability Company is organized is:  
ANY AND ALL LAWFUL BUSINESS.

**Article IV**

The name and Florida street address of the registered agent is:  
INGO MENEGATTI  
4685 LAFRANCE AVENUE  
NORTH PORT, FL. 34286

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: INGO MENEGATTI

### **Article V**

The name and address of managing members/managers are:

Title: MGR  
INGO MENEGATTI  
4685 LAFRANCE AVENUE  
NORTH PORT, FL. 34286

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### **Article VI**

The effective date for this Limited Liability Company shall be:

06/24/2008

Signature of member or an authorized representative of a member

Signature: MARIA M. KALAPATI