Division of Corporations



Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H02000197502 6)))

Note	: DO NOT hit the RI	EFRESH/RELOAD button of generate another c	on your browser from this page. Doing so will
To:	Division of Cor Fax Number Account Name Account Number Phone Fax Number	: (850)205-0383 : BERGER SINGERMAN	Please note attached is our day conjumation page indicating that this was dayed sipt 13 socs at 3:04 pm. Please give this filing the fell date of september 13,2002,
			Marking

LIMITED LIABILITY COMPANY

OUTREACH HOME HEALTH OF WEST PALM BEACH, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03.
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing

Public Access Help

9/13/2002

FAX AUDIT NO.: E02000197502 6

ARTICLES OF ORGANIZATION OF OUTREACH HOME HEALTH OF WEST PALM BEACH, LLC A FLORIDA LIMITED LIABILITY COMPANY

The undersigned, in forming a Florida Limited Liability Company ("Company") under the Florida Limited Liability Company Act, Chapter 608 of the Florida Statutes, hereby adopt the following Articles of Organization for such Company:

ARTICLE 1

NAME

The name of the Company is OUTREACH HOME HEALTH OF WEST PALM BEACH, LLC.

ARTICLE II

ADDRESS

The mailing address of the Company is P.O. Box 5208, Fort Lauderdale, Florida 33310 and the street address of the principal office of the Company is 1501 NW 49th Street, 2nd Floor, Fort Lauderdale, Florida 33309.

ARTICLE III

INITIAL REGISTERED AGENT AND REGISTERED OFFICE

The name and street address of the initial Registered Agent of the Company is Leonard K. Samuels, 350 East Las Olas Boulevard, Suite 1000, Fort Lauderdale, Florida 33301.

FAX AUDIT NO.: H02000197502 6 214457-1

FAX AUDIT NO.: H02000197502 6

ARTICLE IV

MANAGEMENT

The Company is to be managed by one or more managers and is, therefore, a manager managed company.

In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Date: September / 2, 2002

LEUNARD K. SAMUELS, Authorized

Representative

ACCEPTANCE OF DESIGNATION AS REGISTERED AGENT

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 608. Florida Statutes.

Date: September / 1, 2002

LEONARD K. SAMUELS, Initial Registered Agent

FAX AUDIT NO.: H02000197502 6