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RY OF TLORIDA

LIMITED LIABILITY COMPANY

Caregivers Home Health Care, LLC

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ARTICLES OF ORGANIZATION FOR CAREGIVERS HOME HEALTH CARE, LLC, A FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I NAME

The name of the Limited Liability Company is CAREGIVERS HOME HEALTH CARE, LLC.

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is 586 Sable Palm Circle, Altamonte Springs, Florida 32701.

ARTICLE III DURATION

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by its managing member, and the name and address of the managing member is:

<u>Name</u>

Francine L. Ridge

Address 586 Sable Palm Circle Altamonte Springs, Florida 32701

meine L. Ridge, Managing Member

ARTICLE V INITIAL REGISTERED OFFICE AND AGENT

The address of the initial Registered Office of the Limited Liability Company is 586 Sable Palm Circle, Altamonte Springs, Florida 32701, and the initial Registered Agent at such address is Francine L. Ridge.

IN WITNESS WHEREOF, the undersigned managing member affirms that, under penalties of perjury, the facts stated herein are true, and the undersigned managing member has executed these Articles of Organization this 29 day of _________, 2003.

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ACCEPTANCE OF APPOINTMENT BY INITIAL REGISTERED AGENT

THE UNDERSIGNED, an individual, having been named in Article V of the foregoing Articles of Organization as initial Registered Agent at the office designated therein, hereby accepts such appointment and agrees to act in such capacity. The undersigned hereby states that she is familiar with, and hereby accepts, the obligations set forth in Section 608.407, Florida Statutes, and the undersigned will further comply with any other provisions of law made applicable to her as Registered Agent of the limited liability company.

ancine L. Ridge

DATED this 29 day of December, 2003.

FILED

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SECRETARY UF STATE
SECRETARSSEE. FLORIDA

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