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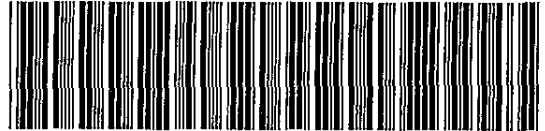
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CORPORATION SERVICE COMPANY

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TALLAHASSEE, FLORIDA

ACCOUNT NO. : 0721000000032

REFERENCE : 708313 82576A

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : June 2, 2004

ORDER TIME : 10:37 AM

ORDER NO. : 708313-005

CUSTOMER NO: 82576A

CUSTOMER: John B. Ritch, Esq
Overstreet Miles Ritch &
Cumbie, P.a.
100 Church Street

Kissimmee, FL 34741

DOMESTIC FILING

NAME: FAMILY HOME HEALTY OF CENTRAL
FLORIDA, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 2956

EXAMINER'S INITIALS: _____

**ARTICLES OF ORGANIZATION
OF
FAMILY HOME HEALTH OF CENTRAL FLORIDA, LLC**

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I

NAME.

The name of this Company is FAMILY HOME HEALTH OF CENTRAL FLORIDA, LLC.

ARTICLE II

PURPOSE.

This Company is organized for the purpose of transacting any and all lawful business for which limited liability companies may be formed under Chapter 608 of the Florida Statutes.

ARTICLE III

ADMITTANCE OF NEW MEMBERS.

The initial member of the company is David Palmer Foster of 218 Flagler Court, St. Cloud, Florida 34769. The Members shall be entitled to admit new Members by unanimous consent. The Members shall unanimously determine the contributions to capital required of the new Members at the time of admission.

ARTICLE IV

MANAGEMENT AND POWERS.

The business of this Company shall be managed under the direction of one or more Managers. All powers of this Company shall be exercised only by or under the authority of such Managers, except as otherwise provided by law, these Articles of Organization, the Regulations or Operating Agreement of this Company. The following is a list of the

names and addresses of each individual who shall serve as a Manager, at the pleasure of the Members, until the first annual meeting of Members:

NAME

ADDRESS

David Palmer Foster

218 Flagler Court, St. Cloud, Florida 34769

ARTICLE V

REGULATIONS AND OPERATING AGREEMENT.

The power to alter, amend or repeal the Regulations and Operating Agreement of this Company shall be vested solely in the Members.

ARTICLE VI

**PRINCIPAL PLACE OF BUSINESS AND INITIAL
REGISTERED AGENT.**

The street address of the principal place of business of this Company and mailing address shall be

100 Church Street

Kissimmee, Florida 34741

County of Osceola

State of Florida

This Company reserves the right, power and authority to establish branch offices at such places as may be designated by this Company. The initial registered agent of this Company shall be John B. Ritch, whose street address is

100 Church Street

Kissimmee, Florida 34741

County of Osceola

State of Florida

ARTICLE VIII

DURATION; DISSOLUTION.

This Company shall exist until 30 years from the date upon which these Articles of Organization are filed with the Department of State of the State of Florida, unless earlier terminated by the terms of this Article VIII. This Company shall be dissolved upon the occurrence of any event which terminates the membership of any Member as a matter of law, unless the remaining Members unanimously consent to the continued existence of this Company within 90 days after the date of occurrence of such event. This Company shall be dissolved upon the unanimous consent of the Members.

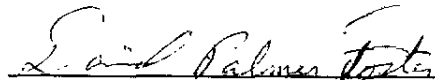
ARTICLE IX

AMENDMENT.

The power to alter, amend or repeal these Articles of Organization shall be vested solely in the Members.

The undersigned, being all of the original Members of this Company, certify that the foregoing constitutes the entire proposed Articles of Organization of this Company.

Executed by the undersigned at Kissimmee, Florida on this 28th day of May, 2004.


David Palmer Foster

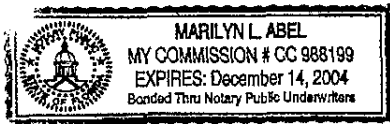
ACKNOWLEDGMENT

STATE OF FLORIDA

COUNTY OF OSCEOLA

Before me personally appeared David Palmer Foster, to me well known and known to me to be the person described in and who executed the foregoing instrument, and acknowledged to and before me that he executed said instrument for the purposes therein expressed.


WITNESS my hand and official seal this 28th day of May, 2004.



Marilyn L. Abel
Notary Public
State of Florida at Large
My Commission Expires: December 14, 2004

ACCEPTANCE OF REGISTERED AGENT

Having been named as registered agent and to accept service of process for Family Home Health of Central Florida, LLC, at the place designated in the Articles of Organization, 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 in Chapter 608, F.S.



John B. Ritch
Registered Agent