

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

L04000076120
FILED 8:00 AM
October 20, 2004
Sec. Of State
jbryan

Article I

The name of the Limited Liability Company is:
NURSES HELPING HANDS SERVICES, LLC

Article II

The street address of the principal office of the Limited Liability Company is:
1819 CYPRESS TRACE DRIVE
SAFETY HARBOR, FL. 34695

The mailing address of the Limited Liability Company is:
1819 CYPRESS TRACE DRIVE
SAFETY HARBOR, FL. 34695

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:
GOTTLIEB & GOTTLIEB, P.A.
2475 ENTERPRISE ROAD
SUITE 100
CLEARWATER, FL. 33763

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: RICHARD GOTTLIEB

Article V

The name and address of managing members/managers are:

Title: MGRM
JAIME PAZ
1819 CYPRESS TRACE DRIVE
SAFETY HARBOR, FL. 34695

Title: MGRM
MARIETA PAZ
1819 CYPRESS TRACE DRIVE
SAFETY HARBOR, FL. 34695

Title: MGRM
MARIANNE PAZ
1819 CYPRESS TRACE DRIVE
SAFETY HARBOR, FL. 34695

Title: MGRM
JAMIE PAZ
1819 CYPRESS TRACE DRIVE
SAFETY HARBOR, FL. 34695

Signature of member or an authorized representative of a member

Signature: RICHARD GOTTLIEB

L04000076120
FILED 8:00 AM
October 20, 2004
Sec. Of State
jbryan