L05000016996

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Account#: I20000000088

Date:	12/05/2018		
Name:		eterson	_
	e #: 10 ^	19112	<u> </u>
Entity Na	me: CARETENDE	RS VISITING	SERVICES OF GAINESVILLE, LLC
☐ Ari	ticles of Incorporati	on/Authorization	n to Transact Business
₽ An	nendment		
☐ Ch	ange of Agent		
☐ Re	einstatement		
□ Co	onversion		
	erger		
☐ Dis	ssolution/Withdraw	al	
☐ Fid	ctitious Name	/	
☐ Ot	her	/	
Authorize Signature	ed Amount:	\$25_	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Caretenders Visiting Serv			
(Name of the Limited Liability Comnay (A Florida Limited L	y as it now ennear:	on our records.)	
(·····································	,- , ,,		Co
The Articles of Organization for this Limited Liability Company	were filed on	02/18/2005	and assigned
Florida document numberL05000016996			in
This amendment is submitted to amend the following:			三 (1)
A. If amending name, enter the new name of the limited liabi	lity company he	re:	တဲ့
			· 55
The new name must be distinguishable and contain the words "Limited Liabil.	ity Company," the de	signation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:	Hugh Wallis Road	South	
(Principal office address MUST BE A STREET ADDRESS)	Lafayette, LA 705	08	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	901	Hugh Wallis Road Lafayette, LA 705	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		our records, enter t	the name of the new
Name of New Registered Agent:			
New Registered Office Address:	Enter Flor	lda street address	
	<u></u>		
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent;			

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 relative 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 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
Manager	LHC Group, Inc.	901 Hugh Wallis Road South	Add
		Lafayette, LA 70508	C Remove
			Clange
Manager 	National Health Industries, Inc.	9510 Ormsby Station Road, Suite 300	O Add
		Louisville, KY 40223	Remove
Director, CEO	William B Yarmuth	9510 Ormsby Station road, Suite 30	D (C
		Louisville, KY 40223	Remove
·			Change
VP Secretary	Todd P Lyles	9510 Ormsby Station road, Suite 300	O _G Add
		Louisville, KY 40223	_ Remove
	·		_ Change
VP	Jeff Reibel	9510 Ormsby Station road, Suite 300	O _⊟ Add
		Louisville, KY 40223	_ Remove
			Change
Director	Steven C Guenthner	9510 Ormsby Station road, Suite 300	O _₽ Add
		Louisville, KY 40223	_IN Remove
			_ Change

Remove: VP	COO - Daniel Schwartz	9510 Ormsby S	station Road Suite 30	0 Louisville, KY 40223
Remove: VI	- Catherine Pedigo 95	10 Ormsby Sta	tion Road Suite 300	Louisville, KY 40223
				
			<u> </u>	
		<u> </u>		
				
			<u></u>	
<u>ite:</u> If the date in:	ther than the date of filing: ted, the date must be specific and c erted in this block does not me e date on the Department of St	ect the applicable s	tatutory filing requiremen	(optional) ys after filing.) Pursuant to 605.0 nts, this date will not be listed
record specifi The 90th day a	es a delayed effective da ofter the record is filed.	ate, but not an	effective time, at 12	2:01 a.m. on the earlier
ted Dolin	iber 4.	MY .		

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