

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

L06000012011
FILED 8:00 AM
February 02, 2006
Sec. Of State
nculligan

Article I

The name of the Limited Liability Company is:

FAMILY OF NURSES HOME CARE, LLC

Article II

The street address of the principal office of the Limited Liability Company is:

540 EAST HORATIO AVE.
330
MAITLAND, FL. US 32751

The mailing address of the Limited Liability Company is:

540 EAST HORATIO AVE.
330
MAITLAND, FL. US 32751

Article III

The purpose for which this Limited Liability Company is organized is:

HOME HEALTH CARE AGENCY

Article IV

The name and Florida street address of the registered agent is:

ADRIENNE B SMITH
811 PINE SHADOW DR.
APOPKA, FL. 32712

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: ADRIENNE SMITH

Article V

The name and address of managing members/managers are:

Title: MGRM
ADRIENNE B SMITH
811 PINE SHADOW DR.
APOPKA, FL. 32712 US

Title: MGRM
PATRICIA L SMITH
811 PINE SHADOW DR.
APOPKA, FL. 32712 US

Title: MGRM
DON C SMITH
811 PINE SHADOW DR.
APOPKA, FL. 32712 US

Signature of member or an authorized representative of a member

Signature: ADRIENNE SMITH

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