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SECRETARY OF STATE
TALLAHASSEF FIORID:

COVER LETTER

SUBJECT: A BETTER ALTERNATIVE HOME CARE, LLC (Name of Limited Liability Company) The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: RYAN J. MILLHORN (Name of Person) THE MILLHORN LAW FIRM (Firm/Company) 13710 U. S. Highway 441, Suite 100 (Address) The Villages, Florida 32159 (City/State and Zip Code) For further information concerning this matter, please call:
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(City/State and Zip Code)
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1 of further information concerning and matter, please can.
Ryan J. Millhorn at (352 753-9333
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}

TO:

Registration Section

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

AMENDMENT TO THE ARTICLES OF ORGANIZATION FOR A BETTER ALTERNATIVE HOME CARE, LLC.

THIS IS TO CERTIFY THAT:

The following Articles amend the Articles of Organization of A BETTER ALTERNATIVE HOME CARE, LLC., filed with the Florida Department of State on September 19, 2006.

ARTICLE I

The name of the Limited Liability Company is:

A BETTER ALTERNATIVE HOME CARE, LLC.

ARTICLE II

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

2405 NORTH HIGHWAY 441, BLDG. 2 FRUITLAND PARK, FL 34731

The mailing address of the Limited Liability Company is:

2405 NORTH HIGHWAY 441, BLDG. 2 FRUITLAND PARK, FL 34731

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:

THE MILLHORN LAW FIRM 13710 U. S. HIGHWAY 441, SUITE 100 LADY LAKE, FL 32159 O7 JAN | 1 PH |: 18
SECRETARY OF STATE TALL AHASSEF FILEBIA

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:

RYAN J. MIĽLHORN

ARTICLE V

The name and address of managing members/managers are:

TITLE: PRES., TREAS.

SHELLEY L. WELLER

9442 C. R. 125C WILDWOOD, FL 34785 TITLE: VICE-PRESIDENT

ROSE A. RUFF

112 SPRING HARBOR LANE

THE VILLAGES, FL 32159

ARTICLE VI

The effective date for this Limited Liability Company shall be: 09/20/2006

IN WITNESS WHEREOF, this Article of Amendment has been duly executed and is being filed in accordance with Florida Statute §608.411, this 10 th day of January, 2007.

Signature of member or an authorized representative of a member:

By:

RYAN J. MILLHORN, Authorized Representative of

SHELLEY L. WELLER, MGRM

A BETTER ALTERNATIVE HOME CARE, LLC.

STATE OF FLORIDA COUNTY OF SUMTER

BEFORE ME, a Notary Public authorized in the State and County set forth above, personally appeared RYAN J. MILLHORN, who is personally know to me, as authorized representative, and acknowledged before me that he executed the foregoing Amendment to the Articles of Organization of A BETTER ALTERNATIVE HOME CARE, LLC..

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the State and County aforesaid, this 10th day of January, 2007.



