

Division of Corporations

Florida Department of State
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : SAVAGE, KRIM, SIMONS & JONES, LLC
Account Number : 073617000267
Phone : (352) 732-8944
Fax Number : (352) 867-0504

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FLORIDA/FOREIGN LIMITED LIABILITY CO.**Humanity First of Florida, LLC**

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ARTICLES OF ORGANIZATION

of

HUMANITY FIRST OF FLORIDA, LLC
a Florida Limited Liability CompanyFILED
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The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Florida Statutes Chapter 608, hereby makes, acknowledges, and files the following Articles of Organization.

ARTICLE I - NAME

The name of the limited liability company shall be HUMANITY FIRST OF FLORIDA, LLC ("Company").

ARTICLE II - ADDRESS

The physical and mailing address of the principal office of the company shall be 5453 SE 44th Circle, Ocala, Florida 34480.

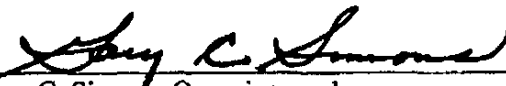
ARTICLE III - REGISTERED OFFICE AND AGENT

The name and street address of the registered agent and registered office of the Company in the state of Florida is Gary C. Simons, Esq., 121 NW Third Street, Ocala, FL 34475.

ARTICLE IV - EXISTENCE

The existence of the Company shall begin on October 17, 2006.

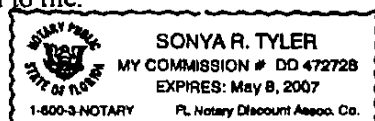
Signed this 17th day of October, 2006.



Gary C. Simons, Organizer and
Authorized Representative of the Members

STATE OF FLORIDA
COUNTY OF MARION

The foregoing instrument was acknowledged before me this 17th day of October, 2006, by Gary C. Simons, as Organizer and Authorized Representative of the Members, who is personally known to me.





Notary Public, State of Florida

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EFFECTIVE DATE
10/17/06

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ACCEPTANCE OF REGISTERED AGENT

for

**HUMANITY FIRST OF FLORIDA, LLC,
a Florida Limited Liability Company**

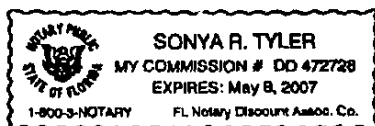
Undersigned hereby states that he is familiar with the obligations of Registered Agent for the Company as provided by Chapter 608, Florida Statutes, and accepts the appointment as Registered Agent for the Company.

Signed this 17th day of October, 2006.


GARY C. SIMONS, Registered Agent

STATE OF FLORIDA
COUNTY OF MARION

The foregoing instrument was acknowledged before me this 17th day of October, 2006, by GARY C. SIMONS, as Registered Agent, who is personally known to me.




Notary Public, State of Florida

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