

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

L07000082205  
FILED 8:00 AM  
August 10, 2007  
Sec. Of State  
dcurry

**Article I**

The name of the Limited Liability Company is:  
APEX COMFORT CARE, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
6789 SOUTHPOINT PARKWAY  
SUITE 200  
JACKSONVILLE, FL. 32216

The mailing address of the Limited Liability Company is:  
6789 SOUTHPOINT PARKWAY  
SUITE 200  
JACKSONVILLE, FL. 32216

**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:  
T. GEOFFREY HEEKIN  
ONE INDEPENDENT DRIVE  
SUITE 2200  
JACKSONVILLE, FL. 32202

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: T. GEOFFREY HEEKIN, ESQ.

## Article V

The name and address of managing members/managers are:

Title: MGR  
JOANN SORENSEN  
6789 SOUTHPOINT PARKWAY, SUITE 200  
JACKSONVILLE, FL. 32216

Title: MGR  
NANCY RALSTON  
6789 SOUTHPOINT PARKWAY, SUITE 200  
JACKSONVILLE, FL. 32216

Title: MGR  
LORRIE SNYDER  
6789 SOUTHPOINT PARKWAY, SUITE 200  
JACKSONVILLE, FL. 32216

Title: MGRM  
JAMES SPRIGGS III  
6789 SOUTHPOINT PARKWAY, SUITE 200  
JACKSONVILLE, FL. 32216

Title: MGRM  
ROBERT G YOUNG  
6789 SOUTHPOINT PARKWAY, SUITE 200  
JACKSONVILLE, FL. 32216

Signature of member or an authorized representative of a member

Signature: JOANN SORENSEN

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