

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

L07000092162  
FILED 8:00 AM  
September 10, 2007  
Sec. Of State  
dcurry

**Article I**

The name of the Limited Liability Company is:  
THERA-P SOLUTIONS, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
5751 WESTVIEW DRIVE  
ORLANDO, FL. US 32810

The mailing address of the Limited Liability Company is:  
5751 WESTVIEW DRIVE  
ORLANDO, FL. US 32810

**Article III**

The purpose for which this Limited Liability Company is organized is:  
SKILLED THERAPY SERVICES IN HOME ENVIRONMENTS □□□□

**Article IV**

The name and Florida street address of the registered agent is:  
LYNETTE DAVIS  
5751 WESTVIEW DRIVE  
ORLANDO, FL. 32810

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: LYNETTE DAVIS

### **Article V**

The name and address of managing members/managers are:

Title: MGRM  
LYNETTE DAVIS  
5751 WESTVIEW DRIVE  
ORLANDO, FL. 32810 US

Title: MGRM  
MELISSA WILLIAMS  
1225 BLACKWATER POND DRIVE  
ORLANDO, FL. 32828 US

### **Article VI**

The effective date for this Limited Liability Company shall be:

09/10/2007

Signature of member or an authorized representative of a member

Signature: LYNETTE DAVIS

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