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From:

: LAW OFFICE OF NATHAN L. TOWNSEND, PA Account Name

Account Number : I20050000145 Phone : (813)988-5500 Fax Number : (813)988-5510

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Autumn Home Care of South Western Florida, LLC

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ARTICLES OF ORGANIZATION OF

AUTUMN HOME CARE OF SOUTH WESTERN FLORIDA, LLC

A Florida Limited Liability Company

The undersigned, for the purposes of forming a Limited Liability Company, pursuant to and by virtue of Chapter 608 of the Florida Statutes, hereby adopts the following Articles Organization.

ARTICLE I - NAME

The name of the Company shall be AUTUMN HOME CARE OF SOUTH WESTERN FLORIDA, LLC (the "LLC" or "Company").

ARTICLE II - TERM

Unless earlier dissolved in accordance with the laws of the State of Florida, the Company shall exist until dissolved pursuant to the Limited Liability Company Operating Agreement of the LLC.

ARTICLE III - RESIDENT AGENT AND REGISTERED OFFICE

The name of the initial resident agent and the initial address of the registered office where process may be served in the State of Florida is Patrick Ambrose, currently located at 10773 70th Ave., N., Seminole, Florida 33772.

ARTICLE IV - CONTINUANCE OF COMPANY BUSINESS

Upon the consent of a majority in interest of all the remaining members, the business of the Company shall continue on the death, insanity, retirement, resignation, expulsion, bankruptcy or dissolution of an individual member or occurrence of any other event which terminates the continued membership of a member in the Company.

ARTICLE V - ORGANIZER

The name and address of the organizer signing these Articles of Organization is Patrick Ambrose, 10773 70th Ave., N., Seminole, Florida 33772.

ARTICLE VI - MANAGEMENT

Section 6.1. Management. The management of the Company is reserved to the Managers as elected pursuant to the Limited Liability Company Operating Agreement of AUTUMN HOME CARE OF SOUTH WESTERN FLORIDA, LLC. The initial Manager is Patrick Ambrose, 10773 70th Ave., N., Seminole, Florida 33772.

Section 6.2 Principal Office. The street and mailing address of the principal office of the Company shall be 10773 70th Ave., N., Seminole, Florida 33772.

SECRETARY OF SIGNI

Section 6.3. Initial Members. The name and address of the initial Member of the Company is as follows:

Name

Patrick Ambrose

10773 70th Ave., N., Seminole, Florida 33772

William T. Tuthill

161 Barbados Dr., Jupiter, FL 33458

Susan Tuthill

161 Barbados Dr., Jupiter, FL 33458

Douglas C. Walters

11437 30th Cove E., Parrish, FL 34219

ARTICLE VII - RESTRICTIONS ON TRANSFER AND ADMISSION OF A NEW MEMBER

The members may admit to the Company one or more additional members who will participate in the profits, losses, available cash flow, and ownership of the assets of the limited liability company on such terms as are in accordance with the company regulations. Not withstanding the foregoing, the admission of any such additional member shall require the consent of members then having a majority of the interest of the LLC.

<u> ARTICLE VIII - NATURE OF MEMBERSHIP INTEREST</u>

The interest of each member of the Company constitutes the personal estate of that member, and may be transferred or assigned as provided in the company regulations. However, if by a vote of a majority-in-interest of the other members of the Company, the members other than the member proposing to dispose of his, her or its interest, do not approve of the proposed transfer or assignment by written consent required under the company regulations, the transferee of the interest shall have no right to participate in the management of the business and affairs of the Company or to become a member. The transferee shall be entitled to receive only the share of profits or other compensation by way of income and the return of contributions to which that member would otherwise be entitled and shall hold only an economic assignee interest.

(SIGNATURES BEGIN ON FOLLOWING PAGE)

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NATHAN L TOWNSEND PA

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IN WITNESS WHEREOF, I have executed these articles of organization.

Dated this _____ day of December, 2007.

Patrick Ambrose, Organizer

STATE OF FLORIDA

COUNTY OF PINELLAS

The foregoing instrument was acknowledged before me this 3 day of December, 2007, by Patrick, as Organizer, and who is either personally known to me or who has produced as identification.

JOHN T BAUT

Notery Public - State of Florida

My Commission Expires Dec 27, 2009

Commission # DD 502504

Bonded By National Notery Assn.

Notary Public

My Commission Expires:

Print, type or stamp name of notary

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CERTIFICATE OF ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Patrick Ambrose, whose address is 10773 70th Ave., N., Seminole, Florida 33772, hereby accepts the appointment as Resident Agent of AUTUMN HOME CARE OF SOUTH WESTERN FLORIDA, LLC in accordance with the Florida Statutes.

Furthermore, that the mailing for the above registered office is as set forth above.

IN WITNESS WHEREOF, I hereunto set my hand this Z day of December, 2007.

Patrick Ambrose