

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

**L08000057533  
FILED 8:00 AM  
June 11, 2008  
Sec. Of State  
thampton**

**Article I**

The name of the Limited Liability Company is:  
CLEARSTONE HEALTH CARE STAFFING, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
719 E. MAGNOLIA STREET  
APOPKA, FL. 32703

The mailing address of the Limited Liability Company is:  
719 E. MAGNOLIA STREET  
APOPKA, FL. 32703

**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:  
EVENS MICHEL  
719 E. MAGNOLIA STREET  
APOKA, FL. 32703

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: EVENS MICHEL

### **Article V**

The name and address of managing members/managers are:

Title: MGRM  
NAGELEY MICHEL  
719 E. MAGNOLIA STREET  
APOPKA, FL. 32703

Title: MGRM  
EVENS MICHEL  
719 E. MAGNOLIA STREET  
APOPKA, FL. 32703

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### **Article VI**

The effective date for this Limited Liability Company shall be:

09/01/2008

Signature of member or an authorized representative of a member

Signature: EVENS MICHEL