

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

L08000058227  
FILED 8:00 AM  
June 12, 2008  
Sec. Of State  
tcline

**Article I**

The name of the Limited Liability Company is:

ADKINSON ASSISTED LIVING FACILITIES, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:

284 CYPRESS TRACE  
TARPON SPRINGS, FL. US 34688

The mailing address of the Limited Liability Company is:

284 CYPRESS TRACE  
TARPON SPRINGS, FL. US 34688

**Article III**

The purpose for which this Limited Liability Company is organized is:

TO PROVIDE STATE APPORVED ASSISTED LIVING FACILITIES TO  
CARE FOR THE ELDERLY.

**Article IV**

The name and Florida street address of the registered agent is:

NOEL H FLASTERSTEIN  
1718 EAST 7TH AVENUE  
201  
TAMPA, FL. 33605

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: NOEL H. FLASTERSTEIN

### **Article V**

The name and address of managing members/managers are:

Title: MGR  
GARY A ADKINSON  
284 CYPRESS TRACE  
TARPON SPRINGS, FL. 34688 US

Title: MGRM  
MARIA G ADKINSON  
284 CYPRESS TRACE  
TARPON SPRINGS, FL. 34688 US

L08000058227  
FILED 8:00 AM  
June 12, 2008  
Sec. Of State  
tcline

### **Article VI**

The effective date for this Limited Liability Company shall be:

06/12/2008

Signature of member or an authorized representative of a member

Signature: NOEL H. FLASTERSTEIN