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Cynthia Greene ~~NAME~~
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08 JUL - 7 PM 4:30
SECRETARY OF STATE
DIVISION OF CORPORATIONS

B. Thibault JUL 08 2008

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

SUBJECT: Articles of Organization for
DIAMOND PROVIDER SERVICES LLC

The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:

CYNTHIA D. GREENE

(Name of Person)

DIAMOND PROVIDER SERVICES LLC

(Firm/Company)

2336 Centennial Blvd

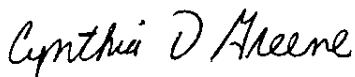
(Address)

Leesburg, FL 34748

(City/State and Zip Code)

For further information concerning this matter, please call CYNTHIA GREENE at
(352) 409-1495.

Sincerely,



Cynthia D. Greene
Manager

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

KNOW ALL MEN BY THESE PRESENTS: That I, CYNTHIA D. GREENE desire to form a limited liability company for the purposes set forth herein and in conformance with the Florida Limited Liability Act, do establish:

ARTICLE I - Name:

The name of the Limited Liability Company is:

**DIAMOND PROVIDER SERVICES LLC
EIN: 74-3173812**

ARTICLE II - Address:

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

**2336 Centennial Blvd
Leesburg, FL 34 7484**

ARTICLE III – Purpose:

That the purpose for which this limited liability company is organized is primarily to provide Care and Services to the Developmentally Disabled, and other goods and services that are permitted by law, within the laws of Florida.

ARTICLE IV - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Cynthia D. Greene
2336 Centennial Blvd
Leesburg, FL 34746

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 as provided for in Chapter 608, Florida Statutes.



Registered Agent's Signature

08 JUL -7 PM 4:30
F.D.C.
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE V- Manager/Owner:

The name and address of the Manager/Owner is as follows:

MGR: Cynthia D. Greene – 100% Owner
2336 Centennial Blvd
Leesburg, FL 34748

ARTICLE VI - Effective date of the Limited Liability Company:

April 23, 2006, for accounting purposes only

REQUIRED SIGNATURE:

Cynthia D. Greene
Signature of owner/manager

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

CYNTHIA D. GREENE
Typed or printed name of signee

State of Florida
County of LAKE

On this 23rd day of APRIL 2006, before me personally appeared CYNTHIA D. GREENE, known to me to be the person described in and who executed the foregoing instrument and acknowledged to me that CYNTHIA D. GREENE executed the same as his free act and deed.

Meryle B. Axelrod
Notary Public

My Commission Expires on:

May 15, 2006



Filing Fees:

\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)