

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

**L08000072953
FILED 8:00 AM
July 29, 2008
Sec. Of State
jbryan**

Article I

The name of the Limited Liability Company is:

ALTERNATIVE CHOICE HOME HEALTH CARE, LLC

Article II

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

6676 BEDFORD OAK DRIVE
KEYSTONE HEIGHTS, FL. 32656

The mailing address of the Limited Liability Company is:

PO BOX 2103
KEYSTONE HEIGHTS, FL. 32656

Article III

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

LLC FOR HOME HEALTH CARE AGENCY, ALTERNATIVE CHOICE HOME
HEALTH CARE.

Article IV

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

STEPHANIE R TRAXLER
6676 BEDFORD OAK DRIVE
KEYSTONE HEIGHTS, FL. 32656

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: STEPHANIE R. TRAXLER

Article V

The name and address of managing members/managers are:

Title: MGR
STEPHANIE R TRAXLER
6676 BEDFORD OAK DRIVE
KEYSTONE HEIGHTS, FL. 32656

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Article VI

The effective date for this Limited Liability Company shall be:

07/29/2008

Signature of member or an authorized representative of a member

Signature: STEPHANIE R. TRAXLER