

L080000/12475

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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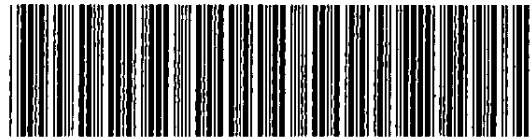
(Business Entity Name)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 DEC -9 AM 8:48

W08-39770  
J. BRYAN AUG 26 2008

J. BRYAN  
DEC 10 2008  
EXAMINER

# Stewart B. Capps, P.A.

Attorneys at Law

Stewart B. Capps

325 Fifth Avenue, Suite 208  
Post Office Box 034021  
Indianapolis, Florida 32903

Telephone 321/727-3200  
Facsimile 321/727-0029

August 22, 2008

## **Via Federal Express**

Registration Section  
Division of Corporations  
Clifton Building, 2661 Executive Center Circle  
Tallahassee, FL 32314

Re: Articles of Organization:

Shannon House, LLC  
Cinnamon House, LLC  
American Life Care, LLC

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 DEC -9 AM 8:48

Dear Sir/Madam:

I am herewith enclosing an original and one copy each of the Articles of Organization for the above referenced Limited Liability Companies. I have enclosed a check in the amount of \$375.00 made payable to the Secretary of State. Upon filing the Articles please return the file-marked copy to me via the enclosed Federal Express envelope.

Thank you for your assistance. If you have any questions regarding this filing, please do not hesitate to call me.

Sincerely-yours,



Stewart B. Capps

SBC/dp  
Enclosures



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 26, 2008

STEWART B. CAPPS  
STEWART B. CAPPS, P.A.  
325 FIFTH AVENUE, SUITE 208  
INDIALANTIC, FL 32903

SUBJECT: AMERICAN LIFE CARE, LLC  
Ref. Number: W08000039770

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 DEC -9 AM 8:48

We have received your document for AMERICAN LIFE CARE, LLC and your check(s) totaling \$375.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at [www.sunbiz.org](http://www.sunbiz.org).

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is #N99000001950, AMERICAN LIFECARE, INC..

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan  
Regulatory Specialist II

Letter Number: 108A00047500

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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Joey Bryan  
Regulatory Specialist II

Letter Number: 608A00054831

# Stewart B. Capps, P.A.

Attorneys at Law

Stewart B. Capps

325 Fifth Avenue, Suite 208  
Post Office Box 034021  
Indianapolis, Florida 32903

Telephone 321/727-3200  
Facsimile 321/727-0029

December 5, 2008

Registration Section  
Division of Corporations  
Clifton Building, 2661 Executive Center Circle  
Tallahassee, FL 32314

FILED  
STATE  
SECRETARY OF CORPORATIONS  
DIVISION OF CORPORATIONS  
08 DEC -9 AM 8:48

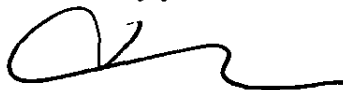
Re: Articles of Organization:  
American Life Care of the Space Coast, LLC

Dear Sir/Madam:

I am herewith enclosing an original and one copy each of the Articles of Organization for the above referenced Limited Liability Company. I have also enclosed your letter stating that the name formerly chosen, American Life Care of Florida, LLC was taken, therefore the name American Life Care of the Space Coast, LLC has been substituted. The check for \$375.00 was sent with the original application. After filing please send a copy of the filed Articles to me via the enclosed envelope.

Thank you for your assistance. If you have any questions regarding this filing, please do not hesitate to call me.

Sincerely yours,



Stewart B. Capps

SBC/dp  
Enclosure

**ARTICLES OF ORGANIZATION  
FOR AMERICAN LIFE CARE OF THE SPACE COAST, LLC**

**ARTICLE I - NAME**

The name of the Limited Liability Company is  
AMERICAN LIFE CARE OF THE SPACE COAST, LLC

**ARTICLE II - ADDRESS**

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

**Principal Office Address**

664 S. Patrick Drive  
Satellite Beach, FL 32937

**Mailing Address**

664 S. Patrick Drive  
Satellite Beach, FL 32937

**ARTICLE III - REGISTERED AGENT  
REGISTERED OFFICE AND REGISTERED AGENT'S SIGNATURE**

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

Thomas J. Palumbo  
664 S. Patrick Drive  
Satellite Beach, FL 32937

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, F.S.



Thomas J. Palumbo

Registered Agent's Signature

(An additional article must be added if an effective date is requested)

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DIVISION OF CORPORATIONS  
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**ARTICLE IV - MANAGER(S) OR MANAGING MEMBER(S):**

The name and address of the Sole Manager or Managing Member is as follows:

**Title:**

**Name and Address:**

MANAGING MEMBER

Thomas J. Palumbo  
664 S. Patrick Drive  
Satellite Beach, FL 32937

**REQUIRED SIGNATURE:**



**Signature of a member or an authorized representative of a member**

(In accordance with §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.)

Thomas J. Palumbo  
Typed or printed name of signee

**REQUIRED SIGNATURE:**



**Signature of a member or an authorized representative of a member**

(In accordance with §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.)

Thomas J. Palumbo  
Typed or printed name of signee

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