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Special Instructions to	Filing Officer:	
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#### **COVER LETTER**

TO: Registration S Division of C			
SUBJECT: Senio	r Focus Health Sy (Name of Resulting	ystems, L.L.C. Florida Limited Company)	D
	siness Entity" into a "	rticles of Organization, Florida Limited Liabil	and fees are submitted tity Company" in
Please return all corre	espondence concernin	g this matter to:	
Karen L. Goldsmith	(Contact Person)		
GOLDSMITH & GROU	,		
P.O. Box 2011	(Address)		
Winter Park, FL 32790	City, State and Zip Code)		
For further information	on concerning this ma	tter, please call:	
Karen L. Goldsmith		at ( 407 ) 740-1	0144
(Name of Conta	ct Person)		ytime Telephone Number)
Enclosed is a check f	or the following amou	int:	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status	■\$180.00 Filing Fees and Certified Copy	☑\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 323	ions er Circle	MAILING A Registration S Division of C P. O. Box 632 Tallahassee, I	Section orporations 27

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SECRETARY OF STATES
TALLAHASSEE FLORIDA

## Certificate of Conversion For "Other Business Entity" Into

#### Florida Limited Liability Company

This Certificate of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this
Certificate of Conversion is: Senlor Focus Health Systems, Inc. P94-48495
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>corporation</u> .  (Enter entity type. Example: corporation, limited partnership, sole proprietorship,
general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of Florida
(Enter state, or if a non-U.S. entity, the name of the country)
on_6/29/1994
(Enter date "Other Business Entity" was first organized, formed or incorporated)
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:
N/A
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization;
Senior Focus Health Systems, L.L.C.
(Enter Name of Florida Limited Liability Company)
5. If not effective on the date of filing, enter the effective date: date of filing.
(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; <u>AND</u> 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.)

2 th				
Signed this 18 day of December	20_08			
Signature of Member or Authorized Representative of Limited Lightlity Company:				
Signature of Member or Authorized Representative Printed Name: David R. Vaughan	e: Nous Mary Jan Title: President & CEO			
Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]				
Signature: David R. Vaughan	Title: President & CEO			
Signature: Printed Name:				
Printed Name:	Title:			
Signature:Printed Name:	m) d			
Signature:Printed Name:	Title:			
Signature:				
Printed Name:	Title:			
Signature:Printed Name:	Title:			
If Florida Corporation:				
Signature of Chairman, Vice Chairman, Director, or Officer.				
If Directors or Officers have not been selected, an Incorporator must sign.				
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.				
If Florida Limited Partnership or Limited Liability Limited Partnership:				
Signatures of <u>ALL</u> General Partners.				
All others: Signature of an authorized person.				
Fees:				
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)			

## ARTICLES OF ORGANIZATION OF SENIOR FOCUS HEALTH SYSTEMS, L.L.C.

#### ARTICLE I NAME

The name of the Limited Liability Company shall be Senior Focus Health Systems, L.L.C.

### ARTICLE II ADDRESS

The mailing address and the street address of the principal office of the Limited Liability Company shall be 1240 Marbella Plaza Drive, Tampa, Florida 33619.

#### ARTICLE III REGISTERED AGENT

The name and the Florida address of the Registered Agent is:

Karen L. Goldsmith Goldsmith & Grout, P.A. 2160 Park Avenue North Winter Park, Florida 32789

### ARTICLE IV EFFECTIVE DATE

The effective date of these articles shall be the date of filing with the Florida Division of Corporations.

David R. Vaughan, President Senior Care Group, Inc.

12-18.06

Date

#### Signature of Resident Agent:

Having been named as Registered Agent and to accept service of process for the above stated Limited Liability Company at the place designated in the 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 in Chapter 608, Fla. Stat.

Karen L. Goldsmith, Registered Agent

SECRETARY OF STATE