

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

L09000014944
FILED 8:00 AM
February 12, 2009
Sec. Of State
nculligan

Article I

The name of the Limited Liability Company is:
ELIFE HEALTH PLANS, LLC

Article II

The street address of the principal office of the Limited Liability Company is:
4800 N FEDERAL HWY.
SUITE 204-D
BOCA RATON, FL. 33431

The mailing address of the Limited Liability Company is:
P.O. BOX 1173
DEERFILED BEACH, FL. 33443

Article III

The purpose for which this Limited Liability Company is organized is:
ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:
KEVIN M COCHRAN
20810 CONCORD GREEN DR. W
BOCA RATON, FL. 33433

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: KEVIN COCHRAN

Article V

The name and address of managing members/managers are:

Title: MGRM
AQUA RA, LLC
94 AQUA RA DRIVE
JENSEN BEACH, FL. 34957

Title: MGR
CREDIT COUNSELORS USA, LLC
4800 N FEDERAL HWY. SUITE 204-D
BOCA RATON, FL. 33431

Article VI

The effective date for this Limited Liability Company shall be:

02/12/2009

Signature of member or an authorized representative of a member

Signature: MITCHELL LIPFIELD

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