

L09000047566

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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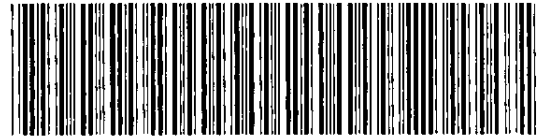
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

B. KOHR

MAY 19 2009

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195
REFERENCE : 995035 7706675
AUTHORIZATION : *Susie Knight*
COST LIMIT : \$ 25.00

FILED
09 MAY 18 AM 9:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : May 14, 2009
ORDER TIME : 3:54 PM
ORDER NO. : 995035-001
CUSTOMER NO: 7706675

CORRECTION FILING

NAME: CONSTANCE CARE HOME
HEALTHCARE/SOUTH, LLC

EFFECTIVE DATE:

XX _____ ARTICLES OF CORRECTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- _____ CERTIFIED COPY
- XX _____ PLAIN STAMPED COPY
- _____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 2956

EXAMINER'S INITIALS: _____

**ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30
business days to correct the attached articles of organization or application to transact business
in Florida.

FIRST: The name of the limited liability company is:
CONSTANCE CARE HOME HEALTHCARE/SOUTH, LLC

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

- Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

The principal address and mailing address had the city spelled incorrectly.

The principal and mailing address should be: 339 Wood Lane,

Circleville, OH 43113

OR

- Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: May 18, 2009

/s/; Charles P. Bradley
Signature of a member or authorized representative of a member
Charles P. Bradley

Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

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TALLAHASSEE, FLORIDA

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

L09000047566
FILED 8:00 AM
May 15, 2009
Sec. Of State
jbryan

Article I

The name of the Limited Liability Company is:

CONSTANCE CARE HOME HEALTHCARE/SOUTH, LLC

Article II

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

339 WOOD LANE
CENTERVILLE, OH. US 43113

The mailing address of the Limited Liability Company is:

339 WOOD LANE
CENTERVILLE, OH. US 43113

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:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL. 32301

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: SUE G KNIGHT

Article V

The name and address of managing members/managers are:

Title: MGRM
CHARLES P BRADLEY
339 WOOD LANE
CIRCLEVILLE, OH. 43113 US

Title: MGRM
CONSTANCE J BRADLEY
339 WOOD LANE
CIRCLEVILLE, OH. 43113 US

Signature of member or an authorized representative of a member

Signature: CHARLES P. BRADLEY

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FILED 8:00 AM
May 15, 2009
Sec. Of State
jbryan