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EXAMINER



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COVER LETTER

TO: Registration Division of	Section Corporations			
SUBJECT:	Ambiance Home care, LLC.			
	Name of Limited Liability Company			
Dear Sir or Madam:				
The enclosed Article	s of Correction and fee(s) are submitted for filing.			
Please return all corre	espondence concerning this matter to the following:			
E	Becky wong Name of Person			
Ambia	nce Home care, LLC.			
7815	N. Dale Mabry Hwy, suite 208			
	NDU FL 33614 City/State and Zip Code			
bedy pwong@yahoo, com E-mail address: (to be used for future annual report notification)				
For further informati	ion concerning this matter, please call:			
Becky	Wong at (813), 766-4383			
─Na	me of Person Area Code & Daytime Telephone Number			
STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, Florida	Registration Section bivision of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following amount:				
\$25 Filing Fee	\$30 Filing Fee & S55 Filing Fee & S60 Filing Fee, Certificate of Status Certified Copy Certified Copy S60 Filing Fee, Certificate of Status & Certified Copy			

CR2E062 (08/05)

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

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

FIRST	The name of the limited liability company is: Ambiance Home Care, LLC.	
SECO	ND: The articles of organization or the application to transact business	
(CH	HECK 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:	
	ARTICLE V This was a mistake.	
-olpte/	Dennis Plakinos, MGR	اماما
Mrs.	7815 N. Dale Mabry Hwy Svite 208)	delet
	OR Tampa, FL 33614	•
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:	
Dated:	- Man is	SECI SECI
	Signature of a member or authorized representative of a member	유유
	Becky Wordsignee Typed or printed name of signee	SS PAR
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	F STATE FORATIONS

Electronic Articles of Organization For Florida Limited Liability Company

L10000021371 FILED 8:00 AM February 25, 2010 Sec. Of State nculligan

Article I

The name of the Limited Liability Company is: AMBIANCE HOME CARE LLC

Article II

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

7815 N DALE MABRY HWY SUITE 208 TAMPA, FL. 33614

The mailing address of the Limited Liability Company is:

7815 N DALE MABRY HWY SUITE 208 TAMPA, FL. 33614

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:

BECKY P WONG 7815 N DALE MABRY HWY SUITE 208 TAMPA, FL. 33614

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: BECKY P WONG

Article V

The name and address of managing members/managers are:

Title: MGR BECKY P WONG 7815 N DALE MABRY HWY SUITE 208 TAMPA, FL. 33614

Title: MGR DENNIS P PLARINOS 7815 N DALE MABRY HWY SUTE 208 TAMPA, FL. 33614

Article VI

The effective date for this Limited Liability Company shall be: 02/25/2010

Signature of member or an authorized representative of a member Signature: BECKY P WONG

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