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Florida Department of State
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To: Division of Corporations
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Account Number : I2007000016C
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**FLORIDA LIMITED LIABILITY CO.
STELLAR FAMILY SOLUTIONS LLC**

Certificate of Status	0
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**ARTICLES OF ORGANIZATION FOR A
FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

STELLAR FAMILY SOLUTIONS LLC

ARTICLE II ADDRESS

The street address of the Limited Liability Company is:

2401 2ND STREET NW, STE 76
WINTER HAVEN, FLORIDA 33881

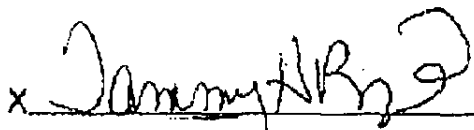
The mailing address of the Limited Liability Company is:

PO BOX 3293
WINTER HAVEN, FLORIDA 33885**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT SIGNATURE**

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

TAMMY H RYAN
2401 2ND STREET NW, STE 76
WINTER HAVEN, FLORIDA 33881

Having been named as registered agent 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.

x 

TAMMY H RYAN / Registered Agent's signature

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ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER

TAMMY H RYAN

PO BOX 3293

WINTER HAVEN, FLORIDA 33885

MANAGING MEMBER

TEDRA S BURGESS

PO BOX 3293

WINTER HAVEN, FLORIDA 33885

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Signature of a member or an authorized representative of a member (In accordance with section 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.

TEDRA S BURGESS

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