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FROM : ______OIVISION OF Corporations

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To:		SS 2 5 €
	Division of Corporations	
	Fax Number : (850)617-6383	<u> </u>
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From:		SA SA
	Account Name : GREENBERG TRAURIG (ORLAND	
	Account Number : 103731001374	. 00

: (407)418-2435

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LAHASSFE, FLORIDA

FLORIDA LIMITED LIABILITY CO.

Living Well Lodges, LLC

Certificate of Status	1
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Estimated Charge	\$160.00

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SEP 16 2011

EXAMINER

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

LIVING WELL LODGES, LLC

ARTICLE II - Address:

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

4130 United Avenue Mount Dora, Floirda 32757

ARTICLE III - Registered Agent, Registered Office and Registered Agent's Signature:

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

Name: Address:

Christopher Young 4130 United Avenue

Mount Dora, Floirda 32757

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 as provided for in Chapter 608, F.S..

Registered Agent's Signature

Signature of a member of an authorized representative of a memb

(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.)

Christopher Young
Typed or printed name of signee