

11/27/2012 12:04 PM 3055985

HOGAN LOVELLS

11/27/2012 03

Division of Corporations

Page 1 of 1

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H12000278231 3)))



H120002782313ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : HOGAN & HARTSON, L.L.P.
Account Number : I20040000129
Phone : (305) 459-6500
Fax Number : (202) 637-5910

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: pheuerger@gmail.com

FLORIDA LIMITED LIABILITY CO.
FLORIDA HOME HEALTH SERVICES, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

033585.000005

RECEIVED

12 NOV 27 PM 12:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

G. MCLEOD

Help

NOV 28 2012

(H12000278231)

**ARTICLES OF ORGANIZATION
OF
FLORIDA HOME HEALTH SERVICES, LLC
(a Florida limited liability company)**

**ARTICLE I
NAME**

The name of the limited liability company is Florida Home Health Services, LLC (the "Company").

**ARTICLE II
ADDRESS**

The mailing address and street address of the principal office of the Company is 5130 Linton Blvd., Suite B-7, Delray Beach, Florida 33484.

**ARTICLE III
DURATION**

The period of duration for the Company shall begin on the date of filing these Articles of Organization with the Florida Department of State and shall have a perpetual existence and duration, until terminated in accordance with applicable law.

**ARTICLE IV
MANAGEMENT**

The Company will be managed by the managers (the "Managers"). The names and business addresses of the Managers who are to serve until their successors are otherwise selected are as follows: Patricia E. Heuberger, 5130 Linton Blvd., Suite B-7, Delray Beach, Florida 33484 and Michael J. Downs, 5130 Linton Blvd., Suite B-7, Delray Beach, Florida 33484.

**ARTICLE V
INITIAL REGISTERED OFFICE AND AGENT**

The street address of the Company's initial registered agent is 1201 Hays Street, Tallahassee, Florida 32301. The name of the Company's initial registered agent at that office is Corporation Service Company.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization on this 27th day of November, 2012.

By: Patricia Heuberger
Patricia Heuberger
Authorized Representative

(H12000278231)

(H12000278231)

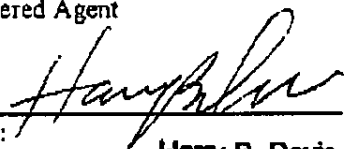
**CERTIFICATE OF ACCEPTANCE BY
REGISTERED AGENT**

The undersigned submits the following statement in accepting the designation as registered agent of **FLORIDA HOME HEALTH SERVICES, LLC**, a Florida limited liability company (the "Company"), in the Company's Articles of Organization:

Having been named as registered agent and to accept service of process for the Company at the place designated in the Company's articles of organization, the undersigned accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of her duties, and the undersigned is familiar with and accepts the obligations of her position as registered agent as provided for in Chapter 608, Florida Statute.

IN WITNESS WHEREOF, the undersigned has executed this Certificate this 27th day of November, 2012.

CORPORATION SERVICE COMPANY
As Registered Agent

By: 
Name: Harry B. Davis
Title: Asst. Vice President

(H12000278231)