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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 13, 2014

CORPORATE ACCESS

SUBJECT: GENESIS HOME HEALTH CARE OF SWFL, LLC  
Ref. Number: W14000009507

We have received your document for GENESIS HOME HEALTH CARE OF SWFL, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 514A00003276

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LLC

1. Genesis Home Health Care of Suwannee, LLC  
(CORPORATE NAME AND DOCUMENT #)

2. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

3. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

4. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

5. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

6. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL INSTRUCTIONS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLES OF ORGANIZATION**  
**OF**  
**GENESIS HOME HEALTH CARE OF SWFL,**  
**LIMITED LIABILITY COMPANY**

**ARTICLE I – NAME**

The name of the Limited Liability Company shall be GENESIS HOME HEALTH CARE OF SWFL, LLC (hereinafter "Company").

**ARTICLE II – ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is 8695 College Parkway Suite 2464, Fort Myers, FL 33919.

**ARTICLE III – REGISTERED AGENT, REGISTERED OFFICE, &  
REGISTERED AGENT'S SIGNATURE**

**Principal Office Address:**

8695 College Parkway Suite 2464  
Fort Myers, FL 33919


**Mailing Address:**

8695 College Parkway Suite 2464  
Fort Myers, FL 33919

The name and the Florida street address of the Registered Agent are:

CHRISTOPHER M. DESANTIS  
8695 College Parkway Suite 2464  
Fort Myers, FL 33919

*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 605, F.S.*

  
**CHRISTOPHER M. DESANTIS,**  
**Registered Agent**

**ARTICLE IV – The name and address of each person authorized to manage and control the Limited Liability Company**

**Title:**

**Name and Address:**

Manager

Christopher M. DeSantis  
1547 Whiskey Creek Drive  
Fort Myers, FL 33919

**ARTICLE V – Effective Date**

If other than the date of filing: February 17, 2014.

**ARTICLE VI – Other provisions, if any.**

N/A

  
CHRISTOPHER M. DESANTIS

(In accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in Section 817.155, F.S.)

**KIESEL & MAY**  
**ATTORNEYS AT LAW**  
2121 MCGREGOR BOULEVARD  
FORT MYERS, FLORIDA 33901

TELEPHONE: (239) 334-1800  
FACSIMILE: (239) 332-3927

REPLY TO: P.O. DRAWER 1000  
FORT MYERS, FL 33902  
Tom@KieselAndMay.com  
Greg@KieselAndMay.com

**VIA HAND DELIVERY BY  
CORPORATE ACCESS, INC.**

February 17, 2014

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: Genesis Home Health Care of SWFL, LLLP

Dear Ladies and Gentlemen:

Please be advised that our firm represents Genesis Home Health Care of SWFL, LLLP in its pursuit to dissolve the limited liability limited partnership. As its representative, it is been made clear to me that my clients are dissolving this LLLP effective immediately, and will not be seeking a revocation of such dissolution.

Should you have any questions and/or concerns, please do not hesitate to contact our office.

Very truly yours,



Thomas F. Kiesel  
TFK/sns

cc: Genesis Home Health Care of SWFL, LLLP

14 FEB 17 10:57  
TALLAHASSEE, FLORIDA