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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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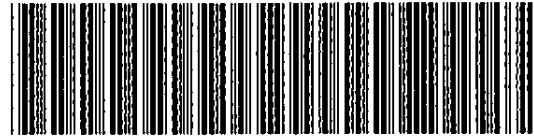
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TALLAHASSEE, FLORIDA

14 MAR -3 AM 11:22

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7106 K.L. 03/04/14

Timothy J. Warfel	
Requestor's Name	
Messer Caparello, P.A.	
Post Office Box 15579	
Address	
Tallahassee, FL 32317	850/222-0720
City/State/Zip	Phone #

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**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. The Senior Care Consultant Group, LLC  
 (Corporation Name) (Document #)
2. \_\_\_\_\_  
 (Corporation Name) (Document #)
3. \_\_\_\_\_  
 (Corporation Name) (Document #)
4. \_\_\_\_\_  
 (Corporation Name) (Document #)

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NEW FILINGS	
	Profit
	NonProfit
XX	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of R.A., Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Report
	Fictitious Name
	Name Reservation

REGISTRATION QUALIFICATION	
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

**ARTICLES OF ORGANIZATION**  
**OF**  
**NEW SENIOR CARE CONSULTANT GROUP, LLC**

The undersigned Member hereby files these Articles of Organization in order to form a limited liability company (the "Company") under the laws of the State of Florida.

**ARTICLE I.**

Name

The name of the Company shall be New Senior Care Consultant Group, LLC

**ARTICLE II.**

Nature of Business

The Company may engage in any activity or business permitted under the laws of the United States and the State of Florida.

**ARTICLE III.**

Death, Retirement, Resignation, Etc. of a Member

The remaining Members, if more than one, shall have the right to continue to carry on the business of the Company in the event of the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a Member or upon the occurrence of any other event which terminates the continued membership of a member in a limited liability company.

**ARTICLE IV.**

Admission of Additional Members

Except as otherwise provided in the Operating Agreement, new members may be admitted by agreement of all existing Members upon payment of contribution agreed upon by the Members at the time of admission.

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**TALLAHASSEE, FLORIDA**

ARTICLE V.

Management by the Manager

The Company shall be managed by Manager(s). The initial Manager and his address is:

Gaylon E. Fruit  
2522 Capital Circle, N.E.  
Suite 10  
Tallahassee, FL, 32308

ARTICLE VI.

Duration of Company's Existence

The Company shall exist perpetually unless sooner dissolved according to law.

ARTICLE VII.

Address of Registered Office, Registered Agent and Principal Office

The address of the initial registered office and principal office of the Company in the State of Florida shall be 2522 Capital Circle, N.E., Suite 10, Tallahassee, FL, 32308. The name of the initial registered agent of the Company at the above address shall be Gaylon E. Fruit. The Company may from time to time change the registered office to any other address in the State of Florida or change the registered agent. The mailing address of the Company shall be 2522 Capital Circle, N.E., Suite 10, Tallahassee, FL, 32308.


ARTICLE VIII.

Amendment

These Articles of Organization may be amended in any manner now or hereafter provided for by law and all rights conferred upon Members hereunder are granted subject to this reservation.

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TALLAHASSEE, FLORIDA

IN WITNESS WHEREOF, the undersigned, being the original subscribing Member to the foregoing Articles of Organization has hereunto set his hand and seal this 3<sup>rd</sup> day of March, 2014.

  
\_\_\_\_\_  
GAYLON E. FRUIT

(In accordance with section 605.0201, Florida Statutes, the execution of these Articles of Organization constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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TALLAHASSEE, FLORIDA

**CERTIFICATE DESIGNATING REGISTERED AGENT AND REGISTERED OFFICE**

In compliance with Florida Statutes Section 48.062 and 605.0113, the following is submitted:

New Senior Care Consultant Care Group, LLC, desiring to organize as a limited liability company under the laws of the State of Florida, has designated, 2522 Capital Circle, N.E., Suite 10, Tallahassee, FL, 32308, as its initial Registered Office and has named Gaylon E. Fruit, located at said address, as its initial Registered Agent.

By:

Gaylon E. Fruit, Manager

Having been named Registered Agent for the above stated Company, at the designated Registered Office, the undersigned hereby accepts said appointment., and agrees to comply with the provisions of Florida law relative to keeping the office open.

Gaylon E. Fruit