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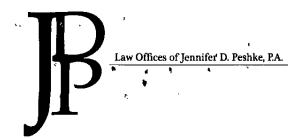


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amendament



February 27, 2015

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

> RE: Affordable Care at Home, LLC No. L15000021526

Dear Sir or Madam:

Enclosed please find Articles of Amendment to Articles of Organization of Affordable Care at Home, LLC. Also, enclosed is a check for \$25.00 to cover the filing fee and a return envelope for a letter of acknowledgment.

Please contact me with any questions. Thank you for your assistance.

Sincerely,

Jennifer D. Peshke

Jennifer O. Peable

JDP/ha Enclosures

cc: Mike Malone

Eric Young

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Affordable Care at Home, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on Jan. 30, 2015 and assigned Florida document number LIS 0000 21526. This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC. Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Vero Beach, FL 329460 P. If a mending the project of the service and contact and	ed E.
A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC. Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Vero Beach, FL 339460	
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.C. Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) LIZS 13 Th St., Ste. F. Vero Beach, FL 329460	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Luckory Ludge Plaza	
(Principal office address MUST BE A STREET ADDRESS) 125 12 The St. Ste. F Vero Beach, FL 32960 Enter new mailing address, if applicable: MCKORY fidge flaza 125 12 The St. Ste. F. Vero Beach, FL 32960	
(Principal office address MUST BE A STREET ADDRESS) 125 12m St. Ste. F. New Beach, FL 32960 Enter new mailing address, if applicable:	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Vero Beach, FL 32940	
(Mailing address MAY BE A POST OFFICE BOX) 1125 13 th St., Ste. F. Vero Beach, FL 32960	
Vero Beach, FL 32960	
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D. If amonding the projectional energy and/on projectional efficiently and an energy of the second s	
B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the registered agent and/or the new registered office address here:</u>	the new
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida street address	
, Florida	
City Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

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 relative 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. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

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	mation, enter change(s) here: (Attach additional sheets, if necessary.)
Effective date, if other than	
	cannot be prior to date of receipt or filed date and cannot be more than 90 days after
(The effective date must be specific, of the date this document is filed by the Dated February	e Florida Department of State)
the date this document is filed by th	Makel Mulan
the date this document is filed by th	e Florida Department of State)

Page 3 of 3

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