Electronic Articles of Organization For Florida Limited Liability Company

L15000045751 FILED 8:00 AM March 13, 2015 Sec. Of State kasaly

Article I

The name of the Limited Liability Company is: OMEGA HEALTHCARE SOLUTIONS, LLC

Article II

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

835 GRAND REGENCY POINTE UNIT 207 ALTAMONTE SPRINGS, FL. 32714

The mailing address of the Limited Liability Company is:

835 GRAND REGENCY POINTE UNIT 207 ALTAMONTE SPRINGS, FL. 32714

Article III

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

DEXTER THOMAS 1681 N.W. 70TH AVENUE APT. # 112 PLANTATION, FL. 33313

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.

Registered Agent Signature: DEXTER THOMAS

Article IV

The name and address of person(s) authorized to manage LLC:

Title: MGR DEXTER THOMAS 1681 NW 70TH AVENUE, APT. 112 PLANTATION, FL. 33313

Title: MGR
HEATHER CALLIARD
835 GRAND REGENCY POINT

835 GRAND REGENCY POINTE, UNIT 207 ALTAMONTE SPRINGS, FL. 32714

Signature of member or an authorized representative

Electronic Signature: DEXTER THOMAS

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

L15000045751 FILED 8:00 AM March 13, 2015 Sec. Of State kasaly