

**Electronic Articles of Organization
For
Florida Limited Liability Company**

**L16000044035
FILED 8:00 AM
March 02, 2016
Sec. Of State
vherring**

Article I

The name of the Limited Liability Company is:

ALL ABOUT NURSING REGISTRY LLC

Article II

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

4041 NW 34 ST
LAUDERDALE LAKES, FL. 33319

The mailing address of the Limited Liability Company is:

4041 NW 34 ST
LAUDERDALE LAKES, FL. 33319

Article III

Other provisions, if any:

PROVIDING HOME CARE TO ELDERLY

Article IV

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

OPAL OLIVER
4041 NW 34 ST
LAUDERDALE LAKES, FL. 33319

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: OPAL OLIVER

Article V

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

Title: PR
OPAL OLIVER
1829 SW 10 CT
FORT LAUDERDALE, FL. 33312

Title: VP
CHRISTOPHER OLIVER
1829 SW 10 CT
FORT LAUDERDALE, FL. 33312

Article VI

The effective date for this Limited Liability Company shall be:

03/03/2016

Signature of member or an authorized representative

Electronic Signature: OPAL OILIVER

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.