

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

L17000131273
FILED 8:00 AM
June 15, 2017
Sec. Of State
jafason

Article I

The name of the Limited Liability Company is:

TRANSITIONAL CARE SOLUTIONS LLC

Article II

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

5341 WEST ATLANTIC AVE
SUITE 301
DELRAY BEACH, FL. US 33487

The mailing address of the Limited Liability Company is:

5341 WEST ATLANTIC AVE
SUITE 301
DELRAY BEACH, FL. US 33487

Article III

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

DOV PICKHOLTZ
5341 WEST ATLANTIC AVE
SUITE 301
BOCA RATON, FL. 33487

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: DOV PICKHOLTZ

Article IV

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

Title: MGR
DOV PICKHOLTZ
5341 WEST ATLANTIC AVE
BOCA RATON, FL. 33487 UN

Title: MGR
HAMMILL L DANA
4514 HIGHGATE DR
DELRAY BEACH, FL. 33445

Title: MGR
RODRIGUEZ V SERGIO
2302 NW 56TH STREET
LAUDERHILL, FL. 33313

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Signature of member or an authorized representative

Electronic Signature: DOV PICKHOLTZ

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.