Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (050) 617-6381

From:

Account Name : REZLEGAL, LLC Account Number: I20140000033 Phone : (904)406-8086 Fax Number : (904)567-1066

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

FLORIDA LIMITED LIABILITY CO. All at Home Orlando, LLC

Certificate of Status	Ò
Certified Copy	0
Page Count	05
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ARTICLES OF ORGANIZATION OF ALL AT HOME ORLANDO, LLC

Pursuant to Section 605.0201 of the Florida Revised Limited Liability Company Act, Florida Statutes, as amended from time to time (the "Act"), the following are adopted as the Articles of Organization of the limited liability company organized hereby:

ARTICLE I NAME

The name of the limited liability company is All at Home Orlando, LLC (the "Company").

ARTICLE II EFFECTIVE DATE AND DURATION

The effective date upon which this Company shall come into existence shall be the date these Articles of Organization are filed. Unless earlier terminated pursuant to the Act or the Operating Agreement (as defined in § 605.0105 of the Act) of the Company, the period of its duration shall be perpetual.

ARTICLE III ADDRESS

The mailing and street address of the principal office of the Company shall be 104 Surrey Lane, Ponte Vedra Beach, Florida 32082.

ARTICLE IV REGISTERED AGENT AND OFFICE

The initial registered office of the Company shall be 9770 Old Baymeadows Road, Suite 133, Jacksonville, Florida 32256 and its initial registered agent at such office shall be Michael B. Purvis.

ARTICLE V MANAGEMENT OF THE COMPANY

The Company will be managed by its sole member in accordance with and subject to the requirements of the Act and Operating Agreement of the Company. The name and street address of the sole member of this Company is:

Name

Address

Gert Healthcare, Inc.

104 Surrey Lane

Ponte Vedra Beach, Plorida 32082

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IN WITNESS WHEREOF, the undersigned authorized representative of the Company has executed these Articles of Organization on behalf of the Company in accordance with § 605.0201 of the Act.

Dated this _____ day of November, 2019.

By Michael B. Purus

Michael B. Purvis, Authorized Representative

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CERTIFICATE DESIGNATING REGISTERED OFFICE AND REGISTERED AGENT FOR THE SERVICE OF PROCESS WITHIN FLORIDA

In compliance with Chapter 605, Florida Statutes, as amended from time to time (the "Act"), the following is submitted:

All at Home Orlando, LLC, desiring to organize or qualify under the laws of the State of Florida as a limited liability company pursuant to the Act, hereby designates Michael B. Purvis as its registered agent to accept service of process within the State of Florida and the address of its registered office shall be 9770 Old Baymeadows Road, Suite 133, Jacksonville, Florida 32256.

Dated this ____ day of November, 2019.

By Midual B. Purvis

SISSIFFCEDENTIS.

Michael B. Purvis, Authorized Representative

Having been named as registered agent to accept service of process for the above stated limited liability company, at the place designated in this certificate, I hereby agree to 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.

Dated this ____ day of November, 2019.

Michael B. Purvis

Michael B. Purvis, Registered Agent

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