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## Florida Department of State

Division of Corporations  
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*Susan Barck*

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DIVISION OF CORPORATIONS

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## LIMITED LIABILITY COMPANY

AGLESS CARE, L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	04
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**ARTICLES OF ORGANIZATION FOR FLORIDA  
LIMITED LIABILITY COMPANY**

**ARTICLE I - Name**

The name of the Limited Liability Company is: **AGELESS CARE, L.L.C.**

**ARTICLE II - Address**

The mailing address and the street address of the principal office of the Limited Liability Company is: 380 South S.R. 434, Suite 1004, Box 190, Altamonte Springs, Florida 32714-3866.

**ARTICLE III - Existence and Duration**

The Limited Liability Company shall commence its existence on the date that these Articles of Organization are filed and its duration shall be perpetual.

**ARTICLE IV - Management**

The Limited Liability Company is to be managed by the Manager as set forth in the regulations. The name and address of the initial manager is:

R. Christopher Lang  
380 South S.R. 434, Suite 1004  
Box 190  
Altamonte Springs, Florida 32714-3866

**ARTICLE V - Registered Agent**

The name and street address of the initial registered agent of the Limited Liability Company is:

R. Christopher Lang  
380 South S.R. 434, Suite 1004  
Box 190  
Altamonte Springs, Florida 32714-3866

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Prepared by: Peter Reinert, Esq., FL Bar #442062  
P.O. Box 231  
Orlando, FL 32802-0231

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**ARTICLE VI - Registered Office**

The street address of the initial registered office of the Limited Liability Company is:

380 South S.R. 434, Suite 1004  
Box 190  
Altamonte Springs, Florida 32714-3866

**ARTICLE VII - Admission of Additional Members**

Admission of additional members of the Limited Liability Company shall be upon the written consent of all Members.

**ARTICLE VIII - Continuation of Business**

Upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company, the remaining members may continue the business of Limited Liability Company upon affirmative vote within 90 days after the occurrence of such event of a majority of the remaining Members.

**AGELESS CARE, L.L.C.**9-21-99

(Date)

By:

R. Christopher Lang  
R. Christopher Lang, Manager

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### REGISTERED AGENT ACCEPTANCE

Having been named as registered agent for AGELESS CARE, L.L.C., and to accept service of process for the above stated limited liability company at the address designated in this certificate pursuant to the provisions of section 608.415, Florida Statutes, 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.

  
R. Christopher Lang  
Registered Agent

9-21-99  
(Date)

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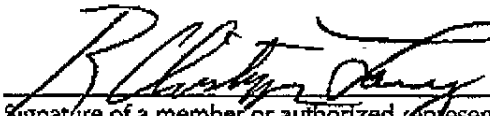
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**AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS  
OF LIMITED LIABILITY COMPANY**

The undersigned member or authorized representative of a member of AGELESS CARE, L.L.C.,  
deposes and says:

1. the above named limited liability company has at least one member;
2. the total amount of cash contributed or anticipated to be contributed by the member(s) are \$30,000;
3. if any, the agreed value of property other than cash contributed and anticipated to be contributed by the member(s) are \$ -0- ; and
4. the total amount of cash or property anticipated to be contributed by member(s) is \$30,000. This total includes amounts from 2 and 3 above.

  
Signature of a member or authorized representative of a  
member, (in accordance with section 608.408(3), Florida  
Statutes, the execution of this affidavit constitutes an  
affirmation under the penalties of perjury that the facts  
stated herein are true.)