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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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L. SELLERS

SEP 21 2010

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 SEP 20 PM 1:05

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LIVING AGAIN GROUHPHOME LLC

Name of Resulting Florida Profit Corporation

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

TARAH B MERISTIL

Contact Person

LIVING AGAIN GROUP HOME INC

Firm/Company

566 DAMASK AVE

Address

PORT ST LUCIE, FL 34983

City, State and Zip Code

MIKOLI@MSN.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RONALD GILBERT

Name of Contact Person

at (772)

Area Code and Daytime Telephone Number

464-4404

Enclosed is a check for the following amount:

- ☐ \$105.00 Filing Fees ☒ \$113.75 Filing Fees and Certificate of Status ☐ \$113.75 Filing Fees and Certified Copy ☐ \$122.50 Filing Fees, Certified Copy, and Certificate of Status

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Certificate of Conversion
For
"Other Business Entity"
Into
Florida Profit Corporation

This Certificate of Conversion **and attached Articles of Incorporation** are submitted to convert the following **"Other Business Entity"** into a **Florida Profit Corporation** in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

LIVING AGAIN GROUP HOME LLC

Enter Name of Other Business Entity

2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY
(Enter entity type. Example: limited liability company, limited partnership,
general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of FLORIDA
(Enter state, or if a non-U.S. entity, the name of the country)

on 01/15/2008
Enter date "Other Business Entity" was first organized, formed or incorporated

3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:

N/A

4. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation:**

LIVING AGAIN GROUP HOME INC

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: 01/01/2011
(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; **AND** 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)

Signed this 9TH day of SEPTEMBER, 2010.

Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: Katia Delmas

Printed Name: KATIA DELMAS Title: CEO

Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: Tarah Meristil
Printed Name: TARAH B MERISTIL Title: MANAGER

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

If Florida Limited Liability Company:

Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

Fees:

Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$ 8.75 (Optional)
Certificate of Status:	\$ 8.75 (Optional)

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

LIVING AGAIN GROUP HOME INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

566 SE DAMASK AVE
PORT ST LUCIE, FL 34983

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

**TO PROVIDE HOME HEALTH CARE FOR THE MENTALLY AND PHYSICALLY
HANDICAPPED**

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

KATHIA DELMAS, 566 SE DAMASK AVE, PORT ST LUCIE, FL 34983, PRESIDENT
TARAH B. MERISTIL, 566 SE DAMASK AVE, PORT ST LUCIE, FL 34983, VICE PRESIDENT

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

KATHIA DELMAS
566 SE DAMASK AVE
PORT ST LUCIE, FL 34983

ARTICLE VII INCORPORATOR

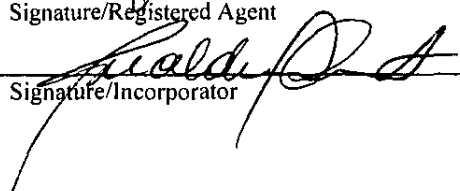
The name and address of the Incorporator is:

RONALD GILBERT
1201 ORANGE AVE
FORT PIERCE, FL 34950

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent



Signature/Incorporator

09/09/2010

Date

09/09/2010

Date

FILED
10 SEP 20 PM 1:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA