STATE OF ALABAMA

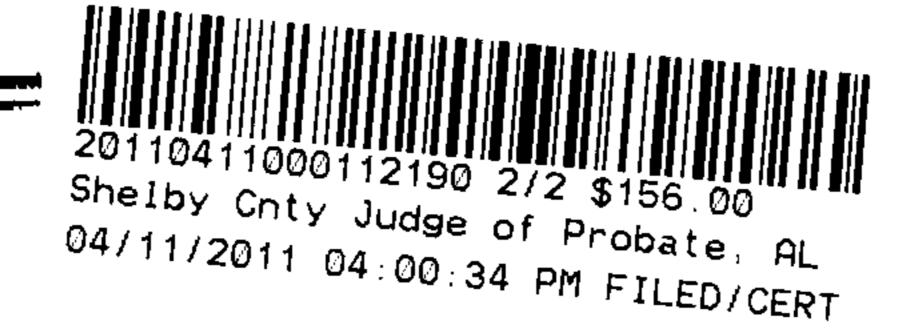
NSTRUCTIONS:

DOMESTIC LIMITED LIABILITY COMPANY ARTICLES OF ORGANIZATION GUIDELINES

STEP 1: THE NAME OF THE LIMITED LIABILITY COMPANY MUST CONTAIN THE WORDS LIMITED LIABILITY COMPANY, LLC OR L.L.C. STEP 2: FILE THE ORIGINAL AND TWO COPIES OF THE ARTICLES OF ORGANIZATION IN THE COUNTY WHERE THE LLC'S REGISTERED OFFICE IS LOCATED. THE SECRETARY OF STATE'S FILING FEE IS \$40. PLEASE CONTACT THE JUDGE OF PROBATE TO VERIFY THE PROBATE FILING FEE.	
PURSUANT TO THE ALABAMA LIMITED LIABILITY COMPANY ACT, THE UNDERSIGNED HEREBY ADOPTS THE FOLLOWING ARTICLES OF ORGANIZATION.	
Article I	The name of the Limited Liability Company: Restagative Care Home Therapy Services, LLC
	(Your company title must end with the words Limited Liability Company, L.L.C. or LLC)
Article II	The duration of the Limited Liability Company is
Article III	The Limited Liability Company has been organized for the following purpose(s):
	To Fravide Quality therapy Jervices In the home Jettin
Article IV	The street address (NO PO BOX) of the registered office: 35147 and the name of the
	registered agent at that office: Jack A. Ellis (205) 914 - 8588
Article V	The names and addresses of the initial member(s), and organizer (if any):
	Dack A. Ellis, 2034 Forest Lakes LN.
	Sterrett, AL. 35147
Article VI	(Attach additional sheets if necessary.) If the Limited Liability Company is to be managed by one or more managers, list the names and addresses of the managers who are to serve until the first annual meeting of the members or until their successors are elected and qualified.
	Jack A. Ellis 2034 Forest Lakes LN. Sterrett, AL. 35147
	->tercet, AL. >>141
	rovision that is not inconsistent with the law for the regulation of the internal affairs of the ity Company is permitted to be set forth in the operating agreement of the LLC.
	TNESS THEREOF, the undersigned members executed these Articles of Organization on
this the	1 day of 4 gril, 20 11.
THIS DOCUMEN	IT PREPARED BY:
DLL 1.1 Rev. 6/20	01 Signature of Member/Organizer

Shelby Cnty Judge of Probate, AL

04/11/2011 04:00:34 PM FILED/CERT



Beth Chapman Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, Beth Chapman, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

Pursuant to the provisions of Title 10A, Chapter 1, Article 5, Code of Alabama 1975, and upon an examination of the entity records on file in this office, the following entity name is reserved as available:

Restorative Care Home Therapy Services, LLC

This domestic limited liability company name is proposed to be formed in Shelby County and is for the exclusive use of JACK A. ELLIS, 2034 FOREST LAKES LN, STERRETT, AL 35147 for a period of one hundred twenty days beginning April 5, 2011 and expiring August 4, 2011



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

April 8, 2011

Date

Bath Chapman

Beth Chapman

Secretary of State