

I, BRUCE McPHERSON, Secretary of State of the State of California, hereby certify:

That the attached transcript of _____ page(s) has been compared with the record on file in this office, of which it purports to be a copy, and that it is full, true and correct.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of

APR 2 0 2006

BRUCE McPHERSON Secretary of State



State of California **Secretary of State**

LIMITED LIABILITY COMPANY **ARTICLES OF ORGANIZATION - CONVERSION**

File #200610910027

ENDORSED - FILED in the office of the Secretary of State of the State of California

APR 1 4 2006

_	MPORTANT — Read all instruction	This Space For Filing Use Only					
CONVERTED ENTITY INFORMATION							
1.	. NAME OF LIMITED LIABILITY COMPANY (End the name with the words "Limited Liability Company," "Ltd. Liability Company," "Ltd. Liability Co.," or the abbreviation "LLC" or "L.L.C.")						
L	Covenant Care California, LLC	Covenant Care California, LLC					
2.	2. THE PURPOSE OF THE LIMITED LIABILTY COMPANY IS TO ENGAGE IN ANY LAWFUL ACT OR ACTIVITY FOR WHICH A LIMITED LIABILITY COMPANY MAY BE ORGANIZED UNDER THE BEVERLY-KILLEA LIMITED LIABILITY COMPANY ACT.						
3.							
L	ONE MANAGER	MORE THAN ONE MANAGER		ALL LIMITED LIA	BILITY COM	PANY MEMBER(S)	
4.	MAILING ADDRESS OF THE CHIEF EXECU		•	Y AND STATE		ZIP CODE	
	27072 Allso Creek Road, Suite 100	·		Creek, CA		92656	
5.	section 1505 and Item 5 must be completed	NAME OF AGENT FOR SERVICE OF PROCESS (If the agent is an individual, the agent must reside in California and both Items 5 and 6 must be completed. If the agent is a corporation, the agent must have on file with the California Secretary of State a certificate pursuant to Corporations Code section 1505 and Item 5 must be completed (leave Item 6 blank).)					
_	Andrew F. Torok						
6.	IF AN INDIVIDUAL, ADDRESS OF AGENT	AN INDIVIDUAL, ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CA			STATE	ZIP CODE	
_	27072 Aliso Creek Road, Suite 100		Aliso C	Creek	CA	92656	
CC	ONVERTING ENTITY INFORMATION						
	NAME OF CONVERTING ENTITY						
_	Covenant Care California, Inc.				•		
8.	FORM OF ENTITY	9. JURISDICTION		10. CA SECRETARY OF	F STATE FIL	E NUMBER, IF ANY	
	Corporation	California	,	C	175057	5 .	
11.	THE PRINCIPAL TERMS OF THE PLAN OF CO THAT EQUALED OR EXCEEDED THE VOTE R	DIVERSION WERE APPROVED BY A V REQUIRED. IF A VOTE WAS REQUIRED	/OTE OF 1	TUC MINADOD OC INTEREC	TO OO OUAT	TO OF FROM OLASS	
		STATE THE CLASS AND NUMBER OF OUTSTANDING INTERESTS ENTITLED TO VOTE AND THE PERCENTAGE VOTE REQUIRED OF EACH CLASS					
	One thousand (1,000) shares of Common Stock 51 percent						
	(-)				o i potaciti		
<u> </u>							
ADDITIONAL INFORMATION							
12. ADDITIONAL INFORMATION SET FORTH ON THE ATTACHED PAGES, IF ANY, IS INCORPORATED HEREIN BY THIS REFERENCE AND MADE A PART OF THIS CERTIFICATE.							
	3. I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT OF MY OWN KNOWLEDGE. DECLARE LAWTHE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND COLOUP. 13/66						
110	LC-1A (REV 06/2005) APPROVED BY SECRETARY OF STATE						