

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L07000102963
FILED 8:00 AM
October 10, 2007
Sec. Of State
dcurry

Article I

The name of the Limited Liability Company is:

EXPERIENCED CARING NURSES "L.L.C"

Article II

The street address of the principal office of the Limited Liability Company is:

445 DOUGLAS AVE
SUITE 2005-21
ALTAMONTE SPRINGS, FL. US 32714

The mailing address of the Limited Liability Company is:

445 DOUGLAS AVE
SUITE 2005-21
ALTAMONTE SPRINGS, FL. US 32714

Article III

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

GUY MARIO SAMEDY
506 NANTUCKET CT
APT 302
ALTAMONTE SPRINGS, FL. 32714

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

Registered Agent Signature: GUY MARIO SAMEDY JR

Article V

The name and address of managing members/managers are:

Title: MGR
MONA GABRIELLE
460 W AOKRIDGE RD APT 417
ORLANDO, FL. 32809 US

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Article VI

The effective date for this Limited Liability Company shall be:

10/10/2007

Signature of member or an authorized representative of a member

Signature: MONA GABRIELLE