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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)205-0381

From:
Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : I20000000257
Phone : (850)224-8870
Fax Number : (850)222-1222

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

Dependable Care Inc.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	$78.75

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TALLAHASSEE, FLORIDA

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:

Dependable Care Inc.

ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is:

6442 49th Ave N. St Petersburg, Fl 33709

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:

Provide Home and Health Care services, Housekeeping, Chore service and Companionship.

ARTICLE IV SHARES
The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)
The name(s), address(es) and title(s):

Robert P. Casna 6442 49th Ave N. St Petersburg, Fl 33709 President / Treasurer
Judith A. Casna 6442 49th Ave N. St Petersburg, Fl 33709 Vice President / Secretary

ARTICLE VI REGISTERED AGENT
The name and Florida street address of the registered agent is:

Robert P. Casna 6442 49th Ave N. St Petersburg, Fl 33709

ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:

Robert P. Casna 6442 49th Ave N. St Petersburg, Fl 33709

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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 this appointment as registered agent and agree to act in this capacity

Signature/Registered Agent — 12/19/01 Date

Signature/Incorporator — 12/19/01 Date