

**Electronic Articles of Incorporation
For**

P11000007155
FILED
January 21, 2011
Sec. Of State
cgolden

EXPERIENCE NURSING , INC.

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

Article I

The name of the corporation is:

EXPERIENCE NURSING , INC.

Article II

The principal place of business address:

3529 BELLE VISTA DRIVE E
SAINT PETERSBURG BEACH, FL. US 33706

The mailing address of the corporation is:

3529 BELLE VISTA DRIVE E
SAINT PETERSBURG BEACH, FL. US 33706

Article III

The purpose for which this corporation is organized is:

HOME HEALTH CARE SERVICES

Article IV

The number of shares the corporation is authorized to issue is:

2000

Article V

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

KIMBERLY LIGAMERI
3529 BELLE VISTA DRIVE E
SAINT PETERSBURG BEACH, FL. 33706

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: KIMBERLY LIGAMERI

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Article VI

The name and address of the incorporator is:

KIMBERLY LIGAMERI
3529 BELLE VISTA DRIVE EAST

SAINT PETERSBURG BEACH FL, 33706

Electronic Signature of Incorporator: KIMBERLY LIGAMERI

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

Article VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: PSD
KIMBERLY LIGAMERI
3529 BELLE VISTA DRIVE E
SAINT PETERSBURG BEACH, FL. 33706 US

Title: VTD
ARIANNE BYERS
5611 146TH TERRACE NORTH
CLEARWATER, FL. 33760 US

Article VIII

The effective date for this corporation shall be:

01/20/2011