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TALLAHASSEE, FLORIDA

L 06/27/05

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ESSENTIAL SERVICES Consulting LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CARLA ANDERSON
(Name of Person)

(Firm/Company)

141 NW 117th TR.
(Address)

CORAL SPRINGS FL 33071
(City/State and Zip Code)

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For further information concerning this matter, please call:

CARLA ANDERSON at (954) 242-2264
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee & Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee, Certificate of Status & Certified Copy
(additional copy is enclosed) |
|---|--|--|---|

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

141 NW 177th Terrace
Coral springs, FL 33071

June 17, 2005

Registration Section
Division of Corporations
Post Office Box, 6327
Tallahassee, FL 32314

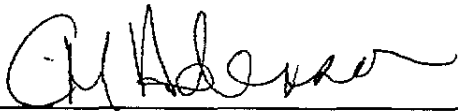
To Whom It May Concern:

Enclosed please find an application requesting registration of a
Limited Liability Company.

The pertinent information is as follows:

Carla Anderson
141 NW 117th Terrace
Coral Springs, FL 30071
(954) 242-2264

Thank you,



Carla Anderson

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ESSENTIAL SERVICES CONSULTING LLC

ARTICLE II - Address:

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

Principal Office Address:

141 NW 117th TR
CORAL SPRINGS
FL 33071

Mailing Address:

141 NW 117th TR
CORAL SPRINGS
FL 33071

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature

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

CARLA ANDERSON
Name

141 NW 117th TR
Florida street address (P.O. Box **NOT** acceptable)

CORAL SPRINGS FL 33071
City, State, and Zip

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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 as provided for in Chapter 608, F.S..

Carla Anderson
Registered Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

CARLA ANDERSON
141 NW 117th Tr.
CORAL SPRINGS FL 33071

MGR

DWEN ANDERSON
141 NW 117th Tr.
CORAL SPRINGS FL 33071

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested

REQUIRED SIGNATURE:

Carla Anderson

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

CARLA ANDERSON

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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