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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Essay Chief 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:
Jay M Feldman Name of Person
Essay Chief LLC. Firm/Company
2525 W Tennessee St #2101 Address
Tallahassee, FL 32304 City/State and Zip Code
Tallahassee, FL 32304 City/State and Zip Code Jay Feldman 11 @ gmail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (954) 62 + 6394 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$\sum_{\text{\$125.00 Filing Fee}} \sum_{\text{\$130.00 Filing Fee}} \& \text{\$\sum_{\text{\$155.00 Filing Fee}} & \$\sum_{\text{\$Certified Copy}} \\ (\text{additional copy is enclosed}) \sum_{\text{\$160.00 Filing Fee}} \\ \text{\$\sum_{\text{\$Certified Copy}} \\ (\text{additional copy is enclosed})} \]

Mailing Address
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Essay Chief LLC.	
	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal offi	ce of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2525 W Tennessee St #2101 Tallanossee, FL 32304	same as Phnaple
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own Ranother business entity with an active Florida registration.)	egistered Agent. You must designate an individual or
The name and the Florida street address of the registered a	gent are:
Jay Feldman	
2525 W Tennesser Florida street address (P.O. Box M	
Tallahassee City	FL 32304 Zip
the place designated in this certificate, I hereby accept to capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblig	ice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this fall statutes relating to the proper and complete performance attions of my position as registered agent as provided for in 605, F.S
(CONTINUE)	D) 25 (2) (1) (2) (3) (4) (5) (6) (6) (6) (6) (6) (6) (6) (6) (6) (6
Page 1 of 2	

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The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	Name and Address:			
"MGR" = Manager	Jay Feldman 2525 w Tennessee 37 #2101 Tallonassee FL 32304				
(Use attachment if necessary)	of filing: January 1, 2015 (OPTIONAL)				
ARTICLE V: Effective date, if other than the date of (If an effective date is listed, the date must be specthed date of filing.)	cific and cannot be more than five business days prior to or 9	0 days afte			
ARTICLE VI: Other provisions, if any.					
REQUIRED SIGNATURE:					
(In accordance with section 605 constitutes an affirmation under I am aware that any false inform	nber or an authorized representative of a member0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. attion submitted in a document to the Department of State as provided for in s.817.155, F.S.)				
Jay F	Typed or printed name of signee	14,00			
	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)