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#### COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ	ECT: Essential Assists LLC	•
	(Name of Resulting Florida Limited Company)	

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Laura Ruben			
	(Contact Person)		
	(Firm/Company)		
3003 San Clara Di	rive #B		
	(Address)		
Delray Beach, FL	33445		
(	City, State and Zip Code)		
Iruben@essentiala	assists.com	1	
E-mail Address: (to b	oe used for future annual re	port notifications)	
For further informati	on concerning this ma	tter, please call:	
Laura Ruben		at (917 )7	83-2433
(Name of Conta	act Person)	(Area Code)	Daytime Telephone Number)
Enclosed is a check t	for the following amou	int:	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fee and Certified Copy	S \$185.00 Filing Fees, Certified Copy, and Certificate of Status

#### STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**MAILING ADDRESS:** 

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

#### **Articles of Conversion**

For

## "Other Business Entity"

Into

## Florida Limited Liability Company

The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

Essential Assists LLC (Enter Nam	ne of Other Business Entity)		
2. The "Other Business Entity" is a LLC			
(Enter	entity type. Example: corporation, limited partnership, neral partnership, common law or business trust, etc.)		
First organized, formed or incorporated u	inder the laws of New York		
Jan 4, 2012	(Enter state, or if a non-U.S. entity, the n	name of the cour	ntry)
on(date of organization, formation or incorporate	tion)		
3. The name of the Florida Limited Liab	ility Company as set forth in the attached Article	les of Organi	ization:
Essential Assists LLC			
(Enter Name of Flor	rida Limited Liability Company)		
4. If not effective on the date of filing, er	nter the effective date: Jan 1, 2015		
(The effective date:  1) cannot be prior date this document is filed by the Floric	to date of receipt or filed date nor more than da Department of State; <u>AND</u> 2) must be the sorganization, if an effective date is listed there	same as the e	
5. The plan of conversion has been appro	ved in accordance with all applicable statutes.		
	Page 1 of 2	14 DEC 18 PM	E Proposition
		PH OF E.F.	The force

•				
Signed this 15 day of DEC	_20 <u>1\u00f4</u>			
Signature of Authorized Representative of Limi	ted Liability Company:			
Signature of Authorized Representatives				
Signature of Authorized Representative of Liminian Signature of Authorized Representative:  Printed Name: Laura Ruben	Title: President, AMBR	-		
Signature(s) on behalf of Other Business Entity:				
Signature:				
Printed Name: LANDA RUBEN	Title: THESHOEN			
Signature:Printed Name:				
Printed Name:	Title:			
Signature:Printed Name:	mu.			
Printed Name:	Title:			
Signature:Printed Name:				
Printed Name:				
Signature:				
Printed Name:	Title:			
Signature:				
Printed Name:	_ Title:			
If Florida Corporation:				
Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc				
·				
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	v Partnership:			
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:	SEC	14	
All others:			DEC	* ~ ,2** 2
Signature of an authorized person.		SS:	8	Particular for enter
Fees:		Y OF	-P	1
Articles of Conversion:	\$25.00	101 115	12: 2	
Fees for Florida Articles of Organization:	\$125.00 \$125.00	êñ.	28	
Certified Copy:	\$30.00 (Optional)	;> ·		
Certificate of Status:	\$5.00 (Optional)			

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
Essential Assists LLC	· 	
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:	: 1 CC	11.12.0
The mailing address and street address of the pri	ncipal office of the Limit	ed Liability Company is:
Principal Office Address:	Mailing Address:	
3003 San Clara Drive #B	3003 San Clara Drive	#R
Delray Beach, FL 33445	Delray Beach, FL 334	<del></del>
Delity Deadit, 1 E 00440	Donay Boadin, 7 E 00-	
(The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)  The name and the Florida street address of the re-		n individual or another
Name		
3003 San Clara Drive #B		
Florida street address (P.O.	Box NOT acceptable)	
Delray Beach	FL 33445	
City	Zip	
Trustica Landau anno de la constanta de la con		A
Having been named as registered agent and to		
liability company at the place designated in registered agent and agree to act in this capacit	•	• • •
statutes relating to the proper and complete p		•
accept the obligations of my position as reg		
accept the obligations of my position as regi	siereu ugeni us proviueu j	or in Chapter 003, F.S
		CRE CRE
Registered Agent's Signa	nture (REQUIRED)	TARY ASSE
(CONTINU	JED)	PM 12: 28 OF SIATE
Page 1 of	2	28 28 28

Company:	
<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Le ve D. I
AMBR, MGR	Laura Ruben
	3003 San Clara Drive #B
	Delray Beach, FL 33445
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the of (If an effective date is listed, the date must be to or 90 days after the date of filing.)  ARTICLE VI: Other provisions, if any.	date of filing: <u>Jan 1, 2015</u> . (OPTIONAL) be specific and cannot be more than five business days prior
- Culci provisions, il miy.	
REQUIRED SIGNATURE:	
	TALE TA
	———————————— <del>————————————————————————</del>
Signature of a member	or an authorized representative of a member.
	(b), Florida Statutes, the execution of this document
Lam aware that any folco information sub-	ties of perjury that the facts stated herein are true.
ann aware that any talse information subjects	mitted in a document to the Department of State
constitutes a third degree felony as provid	led for in s.a17.155, F.S.)
Laura Ruben	
Туре	ed or printed name of signee
Filing Fees:	
\$125.00 Filing Fee for Articles of	Organization and Designation

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

**ARTICLE IV-**

Page 2 of 2

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)