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(Re	equestor's Name)			
(Address)				
(Ad	dress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				





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11/05/07--01019--025 **105.00

SECRETARY OF STATENS
DIVISION OF CORPORATIONS
07 NOV -5 PM 4: 02



COVER LETTER

TO: Registration Division of	n Section Corporations			
SUBJECT: Sim	ply Benefits, Inc.			
	(Name of Result	ing Florida Profit Cor	rporation)	
	ficate of Conversion, A Business Entity" into a			
	orrespondence concerni	ng this matter to:		
Elizabeth A. [_	0 0
	(Contact Person)			A LA
Simply Benefi	its			07 NOV -5 PH 4:
	(Firm/Company)		-	51 6
19251 Modbe		11 to 11.00	erntragio gilgia	PH L
Transfer to the sure	(Address)		· v roji	կ: 02
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Wellington, Fl	_ ['] 33414		भूजार ज्यां १ स्य	
· Man and the	(City, State and Zip Code)		New York Con-	
For further information	ation concerning this m	atter, please call:	. •	
Elizabeth A. [Davi ^ɛ	at (561	667-5473	
(Name of C	Contact Person)		and Daytime Telephone Nu	mber)
Enclosed is a check	k for the following amo	ount:		ì
▼\$105.00 Filing Fees	\$113.75 Filing Fees and Certificate of Status	\$113.75 Filing and Certified Cop		ıd
STREET ADDRE	ESS:	MAIL	ING ADDRESS:	
Registration Section	n (*) (-) (−	Registration Section		
Division of Corpor	ations	Divisio	n of Corporations	
Clifton Building 2661 Executive Ce			ox 6327	
2001; Executive Ce	mer Circie	i ailaha	ssee, FL 32314	

Tallahassee, FL 32301

For "Other Business Entity". Into

Florida Profit Corporation

This Certificate of Conversion <u>and attached Articles of Incorporation</u> are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate

of Conversion is:	, , , , , , , , , , , , , , , , , , , ,
Simply Benefits	#G02261900319
(Enter Na	ame of Other Business Entity)
2. The "Other Business Entity" is a _	sole proprietorship
(Enter entity type. Example: 1	limited liability company, limited partnership, sole artnership, common law or business trust, etc.)
First organized, formed or incorporate	ed under the laws of Florida
	non-U.S. entity, the name of the country)
September 18, 2002	
(Enter date "Other Business En	ntity" was first organized, formed or incorporated)
3. If the jurisdiction of the "Other Buaws of which it is now organized, for	usiness Entity" was changed, the state or country under the rmed or incorporated:
4. The name of the Florida Profit Connection:	rporation as set forth in the attached Articles of
Simply Benefits, Inc.	

Page 1 of 2

(Enter Name of Florida Profit Corporation)

5. If not effective on the date of filing, enter the effective date: January 1, 2008 (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.) 1st November Signed this_ day of Signature: (Must be signed by a Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator.) Printed Name: Elizabeth A. Davi _Title: President Fees: Certificate of Conversion: \$35.00

\$70.00

\$8.75 (Optional)

\$8.75 (Optional)

Fees for Florida Articles of Incorporation:

Certified Copy:

Certificate of Status:

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:

Simply Benefits, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

12351 Westhampton Circle Wellington, FL 33414

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Elizabeth A. Davi - President 12351 Westhampton Circle Wellington, FL 33414

ARTICLE VI REGISTERED AGENT

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

Elizabeth A. Davi 12351 Westhampton Circle Wellington, FL 33414 OT NOV -5 PH 4: 02

ARTICLE VII INCORORATOR

The name and address of the Incorporator is:

Elizabeth A. Davi 12351 Westhampton Circle Wellington, FL 33414

ARTICLE VIII EFFECTIVE

The date that this corporation will become effective is:

January 1, 2008

Having been named as registered agent to accept ser corporation at the place designated in this certificate.	<u>-</u>
appointment as registered agent and agree to act in the	•
Qualeth Dain	11/1/2007
Signature / Registered Agent	Date
Chaleth Dayr	11/1/2007
/ Signature / Incorporator	Date