

P150000051558

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

 PICK-UP☐ WAIT☐ MAIL

(Business Entity Name)

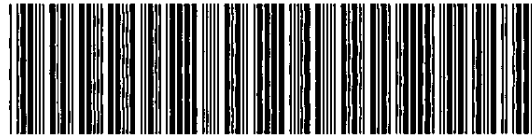
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only








400273473644

06/01/15--01037--015 **122.50

THE UNIVERSITY OF CHICAGO

2015 JUN 15 A 8:01



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
15 JUN 15 PM 2:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 2, 2015

LATONIA SIMMONS
12428 CADLEY CIR
JACKSONVILLE, FL 32219

SUBJECT: LA ASSISTANT SERVICES, INC.
Ref. Number: W15000038556

We have received your document for LA ASSISTANT SERVICES, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Organization, if any.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://www.sunbiz.org/titledef.html>.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Terri J Schroeder
Regulatory Specialist II

Letter Number: 015A00011546

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: LA Assistant Services, Inc
Name of Resulting Florida Profit Corporation

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

Latonia Simmons
Contact Person

LA Assistant Services
Firm/Company

12428 Cadley Circle
Address

Jacksonville FL 32219
City, State and Zip Code

slatonia18@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Latonia Simmons at (904) 802-4363
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$105.00 Filing Fees ☐ \$113.75 Filing Fees and Certificate of Status ☐ \$113.75 Filing Fees and Certified Copy ☒ \$122.50 Filing Fees, Certified Copy, and Certificate of Status

STREET ADDRESS:

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

MAILING ADDRESS:

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

Certificate of Conversion
For
"Other Business Entity"
Into
Florida Profit Corporation

This Certificate of Conversion **and attached Articles of Incorporation** 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:

LA Assistant Services, LLC 40-113530
Enter Name of Other Business Entity

2. The "Other Business Entity" is a limited liability company
(Enter entity type. Example: limited liability company, limited partnership,
general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of Florida
(Enter state, or if a non-U.S. entity, the name of the country)

on November 1, 2010
Enter date "Other Business Entity" was first organized, formed or incorporated

3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:

Florida

4. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation**:

LA Assistant Services, Inc
Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: _____

(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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

FILED
2015 JUN 15 A 8:01
DEPARTMENT OF STATE
TALLAHASSEE, FL 32399

Signed this 8th day of June, 2015.

Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an

Incorporator: [Signature]
Printed Name: Latonia Simmons Title: Manager

Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: [Signature]

Printed Name: Latonia Simmons Title: Manager

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

If Florida Limited Liability Company:

Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

Fees:

Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

RECEIVED
OFFICE OF THE
CLERK OF THE
SUPREME COURT
JULY 15 2015

2015 JUN 15 A 8:01

FILED

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: LA Assistant Services, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Principal street address

12428 Cadley Circle
Jacksonville FL 32219

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any & all lawful Business

ARTICLE IV SHARES

The number of shares of stock is: One Hundred shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Latoria Simmons, manager Name and Title: _____

Address: 12428 Cadley Circle Address: _____
Jacksonville FL 32219

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

FILED
2015 JAN 15 A 8:01
CLERK OF DISTRICT COURT
JACKSONVILLE, FLORIDA

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Latoria Simmons

Address: 12428 Cadley Circle
Jacksonville FL 32219

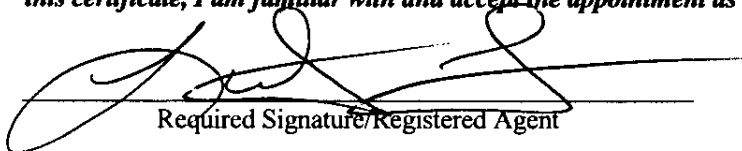
ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Latoria Simmons

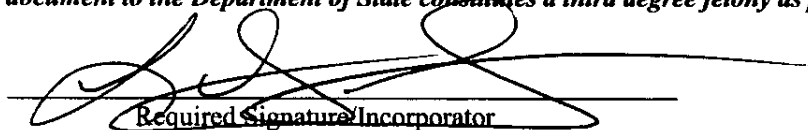
Address: 12428 Cadley Circle
Jacksonville FL 32219

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature/Registered Agent

6/8/15
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any 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.


Required Signature/Incorporator

6/8/15
Date

FILED
2015 JUN 15 A 8:01
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA