# L04000094015

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SECRETARY OF LARIE TALLAHASSEE, FLORIDA

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## TRANSMITTAL LETTER

TO:	Registration Sec Division of Corp				
	M.	yoranons			
SUBJI		Right Choice Investm	ent Consultants	•	
		(Name of Limited	Liability Company)		
The er	nclosed Articles of	Organization and fee(s) are su	omitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
		Walter Free	eman		
		(N	ame of Person)	· <del></del>	
			stment Consultants		
		(F	irm/Company)		
		QE1 Minet	4th Street		
		95) West	(Address)		~
				W04-468 63	
		Riviera Be	ach, FL 33404		
		(City/	State and Zip Code)	•	
For fu	irther information o	concerning this matter, please	call:		
	Walter Fre	eeman	at ( 561 ) 502-2	2253	
		of Person)	(Area Code & Daytime To	elephone Number)	
Enclo	osed is a check fo	r the following amount:			_
<b>SO</b> \$12	25.00 Filing Fee	□ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	TALLAHASSEE
STREET ADDRESS:		MAILING ADDRESS:		-17	
		ration Section on of Corporations	Registration Section Division of Corporations		LORN
409 E. Gaines Street			P.O. Box 6327		IDA
Tallahassee, Florida 32399 Tallahassee, Florida 32314					



### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

December 23, 2004

WALTER FREEMAN RIGHT CHOICE INVESTMENT CONSULTANTS 951 WEST 4TH STREET RIVIERA BEACH, FL 33404

SUBJECT: RIGHT CHOICE INVESTMENT CONSULTANTS

Ref. Number: W04000046868

We have received your document for RIGHT CHOICE INVESTMENT CONSULTANTS and your check(s) totaling \$250.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

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) 245-6958.

Lee Rivers Document Specialist

Letter Number: 104A00071276

PILED

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SECRETISSÉE FLORIDA

ARTICLE I - Name: The name of the Limite	ed Liability Compan	y is:			
	Right Choice Investn	nent Consul	tants, L+d.	co.	
ARTICLE II - Addre The mailing address an		ne principal	l office of th	he Limited L	iability Company is:
Principal Office Addr	<u>'ess:</u>	<u>Mai</u>	ling Addre	<u>ss:</u>	
951 West 4th Street		951 V	Vest 4th Stre	eet	
Riviera Beach, FL. 33404	4	Rivie	a Beach, FL	. 33404	
The name and the Flor	Wayne	l. Richards, Name Idway, Suite	Esq.	: 	
	Riviera Beach		33404		
		FL tate, and Zip		<del> </del>	
liability company a registered agent and a statutes relating to ti	t the place designate gree to act in this cape proper and completens of my position as	d in this cer pacity. I fur ete pe <b>rf</b> orm	rtificate, I he rther agree ance of my d agent as pro	ereby accept . to comply wit luties, and I c	th the provisions of all am familiar with and Chapter 608, F.S SECRETARY OF 28 PM
	(CON	TINUED)			1: 2 ORII

Page 1 of 2

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

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

Title;	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	- white and Huaress.
MGR	Walter Freeman
	951 West 4th Street
	Riviera Beach, FL. 33404
	•
(Use attachment if necessary)	,
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	·

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.)

Walter Freeman

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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