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Florida Department of State
Division of Corporations
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : HUBCO
Account Number : 104662003400
Phone : (516)935-3940
Fax Number : (516)935-3088

LIMITED LIABILITY COMPANY

America's Choice Holding LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

AL

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VISOR OF CORPORATION

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

H05000053869

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ARTICLE I - Name

The name of the Limited Liability Company is: **America's Choice Holding LLC**

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ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Office Address:

2731 Vista Parkway D#10

West Palm Beach, FL 33411

Mailing Address:

3100 Eden Court

West Palm Beach, FL 33411

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature

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

Ralph Principe

Name

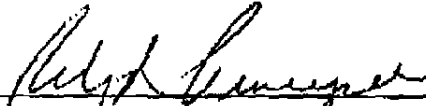
3100 Eden Court

(P.O. Box or Mail Drop Box **NOT** Acceptable)

West Palm Beach, FL 33411

(City / State / Zip)

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.



Registered Agent's Signature - Ralph Principe

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

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MGRM

Ralph Principe- 3100 Eden Court, West Palm Beach, FL 33411
REGISTRY OF STATE
TALLAHASSEE, FLORIDA

(Use attachment if necessary)

REQUIRED SIGNATURE:



Signature of a member or 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.)

Ralph Principe

Typed or printed name of signee