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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LR 06/27/05

6/1/05

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, Florida 32314

SUBJECT: A. Choice Paralegal Services, LLC

The enclosed Articles of Organization for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

A. Choice Paralegal Services, LLC
P.O. Box 1295
Homestead, Florida 33090-1295

For further information concerning this matter, please call:

A. Choice Paralegal Services, LLC at (786) 206-6539.

Enclosed is a check made payable to the Florida Department of State for \$125.00 for the registration of a limited liability company.

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

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TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

June 14, 2005

A. CHOICE PARALEGAL SERVICES, LLC
P.O. BOX 1295
HOMESTEAD, FL 33090-1295

SUBJECT: A. CHOICE PARALEGAL SERVICES, LLC
Ref. Number: W05000029300

We have received your document for A. CHOICE PARALEGAL SERVICES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A post office box is not an acceptable address for the registered agent.

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: 905A00041229

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, Florida 32314

SUBJECT: A. Choice Paralegal Services, LLC

The enclosed revised Articles of Organization for a Limited Liability Company are submitted for filing.

Please return all correspondence concerning this matter to the following:

A. Choice Paralegal Services, LLC
P.O. Box 1295
Homestead, Florida 33090-1295

For further information concerning this matter, please call:

A. Choice Paralegal Services, LLC at (786) 206-6539.

A check made payable to the Florida Department of State for \$125.00 for the registration of a limited liability company was attached to the previous request. A correction was requested by the Division of Corporations and said payment should be issued for the corrected Articles of Organization.

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
OF
A. CHOICE PARALEGAL SERVICES, LLC**

ARTICLE I - NAME

The name of the limited liability company is A. Choice Paralegal Services, LLC, ("company").

ARTICLE II - ADDRESS

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

Principal Office Address:

2820 NW 100th Street
Miami, Florida 33147

Mailing Address:

P.O. Box 1295
Homestead, Florida 33090-1295

**ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE**

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

Elisa Velez
2820 NW 100th Street
Miami, Florida 33147

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.



Elisa Velez

ARTICLE IV - MANAGERS OR MANAGING MEMBERS

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

EFFECTIVE DATE
6/1/05

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TALLAHASSEE, FLORIDA

Title:
"MGR" = Manager
"MGMR" = Managing Member

Name and Address:

MGMR

Elisa Velez
P.O. Box 1295
Homestead, Florida 33090-1295

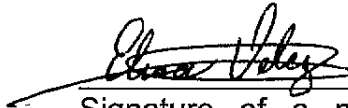
MGMR

Yokairy Tavarez
P.O. Box 1295
Homestead, Florida 33090-1295

ARTICLE V - EFFECTIVE DATE

The effective date of the company shall be June 1, 2005.

REQUIRED SIGNATURE:

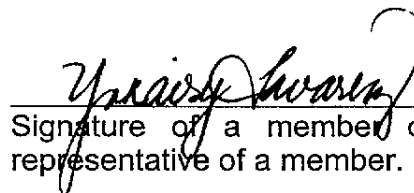


Signature of a member or an authorized representative of a member.

(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.)

Elisa Velez

Typed or printed name of signee



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.)

Yokairy Tavarez

Typed or printed name of signee

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TALLAHASSEE, FLORIDA