(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status

L. SELLERS

AUG 142008

EXAMINER

Office Use Only



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COVER LETTER

TO:	"Registration Section Division of Corporations		,			
SUBJI	ECT: Choice Solutions Group,	LLC				
(Name of Limited Liability Company)						
The en	closed Articles of Organization and fee(s) are	submitted for filing	g.			
Please	return all correspondence concerning this matt	ter to the following	;			
	Jose M. Camino					
		(Name of Person)				
	Choice Solutions Group, LL	С				
	The state of the s	(Firm/Company)				
11111 Biscayne Blvd, #1405						
		(Address)				
	Miami, FI 33181					
	(Cit	y/State and Zip Code	()			
For fur	ther information concerning this matter, please	e call:				
Jose	M Camino	_{at (} 786	262-9009			
	(Name of Person)	(Area Cod	e & Daytime Telephone Number)			
Enclos	sed is a check for the following amount:					
\$125 .	.00 Filing Fee \$\times \text{S130.00 Filing Fee & Certificate of Status}	\$155.00 Filin Certified Co (additional cop	py Certificate of Status &			
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton B 2661 Exe	courier Address Ion Section of Corporations suilding coutive Center Circle see, FL 32301			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:
Choice Solutions Group, LLC
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

Principal Office Address:

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

Mailing Address:

Jose M Camino	Jose M Camino 11111 Biscayne Blvd, #1405		
11111 Biscayne Blvd, #1405			
Miami, Fl 23100 - 33181	Miami, Fl 3 3190- 33/8/		

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Jose M Camino				
Name				
11111 Biscayne Blvd	I, #14	105		
Florida street address (P.O. Box NOT acceptable)				
Miami, Fl 33180 -	FL	33181		
City, State, a	nd 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 (REQUIRED)

(CONTINUED) Page 1 of 2 PILED

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SECKETARY OF STATE

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

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

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGR	Jose M Camino
	11111 Biscayne Blvd, #1405
	Miami, FI 32486 33/8/
MGR	Melissa F. Rivero
	5750 Collins Ave, #11B
	Miami Beach, FI 33140
• .•	
	
(Use attachment if necessary)	

ARTICLE V: Effective date, if other than the date of filing: <u>August 11, 2008</u>. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

Jose M Camino

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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