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TALLAHASSEE, FLORIDA

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S MASON

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: FIRST CHOICE FINANCIAL NETWORK LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ERNEST DUFORT

Name of Person

FIRST CHOICE FINANCIAL NETWORK LLC

Firm/Company

4100 CORPORATE SQUARE STE 108

Address

NAPLES FL 34104

City/State and Zip Code

MY1CHOICEINS@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ERNEST DUFORT

Name of Person

239 at ()

Area Code

963-4576

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

FILED
MAR - 8
11:42:28
SECRETARY OF STATE
TALLAHASSEE
FLORIDA
New Registered Agent

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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.

(b) The 90th day after the record is filed.

Ernest Turner

ERNEST DUFORT

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