## Florida Department of State

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To:

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Fax Number

: (850)205-0383

From:

: BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC. Account Name

Account Number : 075350000353 Phone

: (212)431-5000

Fax Number

; (212)431-1441

### LIMITED LIABILITY COMPANY

VITAL PROMOTIONS LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

VISION OF CORPORATION

4030002203419

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - NAME:

The name of the Limited Liability Company is: VITAL PROMOTIONS LLC

#### **ARTICLE II - ADDRESS:**

The mailing address and street address of the principal office of the Limited Liability Company is: 1505 South First Street, Jacksonville Beach, PL 32250

ARTICLES III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are: Monica Gallagher, 1505 South First Street, Jacksonville Beach, FL 32250

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..

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ARTICLE IV - Management (Check box if applicable,)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

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

(In accordance with section 608.408 (3), Florida Statutes, the execution of this document constituents an affirmation under the penalties of perjury that the facts stated herein are true.)

Monica Gallagher

typed or printed name of signee
BlumbergExcelsior Corporate Services, Inc., 62 White Street, New York, NY 10013