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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : INCORPORATETIME.COM, INC.
Account Number : I19990000221
Phone : (631) 224-9004
Fax Number : (631) 589-2848

LIMITED LIABILITY COMPANY

Vision Quest Ventures L.L.C.

Certificate of Status	0
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10-27-03

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED
LIABILITY COMPANY**

ARTICLE I: NAME:

The name of the Limited Liability Company is:

Vision Quest Ventures L.L.C.

ARTICLE II: ADDRESS:

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

7702 Water Oak Court, Kissimmee, FL 34747

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

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

Jordan Adams
7702 Water Oak Court
Kissimmee, FL 34747

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.

Jordan Adams

Registered agent's signature

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