| U 4 U U TRANSMIT | FALLET CR / (4 | • |
|---|--|-------|
| TO: Registration Section Division of Corporations | | |
| SUBJECT: Vision Renewo | al Communications, LLC Liability Company) | |
| The enclosed Articles of Organization and fee(s) are sul | omitted for filing. | |
| Please return all correspondence | e concerning this matter to the following: | |
| Naomi Fr | 1726/1 ame of Person) | |
| Vision Renewal | Communications, LLC ' | · |
| 5530 alden Bridge | DY: (Address) | ·; |
| Jackson u'lle | | |
| For further information concerning this matter, please c | aff: | |
| Maomi Frizzell (Name of Person) | (Area Code & Daytime Telephone Number) | |
| | 6000 2878 2091 | / |
| | 60002878209/ 02/16/04 01012 00 | 4 |
| STREET ADDRESS: Registration Section Division of Corporations | | 15.0 |

Tallahassee, Florida 32399

P.O. Box 6327 Tallahassee, Florida 32314

04 HAR -3 PM 12: 16

DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 26, 2004

VISION RENEWAL COMMUNICATIONS, LLC 5530 ALDEN BRIDGE DR. JACKSONVILLE, FL 32258

SUBJECT: VISION RENEWAL COMMUNICATIONS, LLC

Ref. Number: L01000019132

We have received your document for VISION RENEWAL COMMUNICATIONS, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Because this company filed a voluntary dissolution on March 28, 2003, it cannot file a reinstatement. If you would like, you can file a new LLC under the same name. We have enclosed a blank form for doing so. If you do not wish to form a new LLC, please return this letter to me and write on it "Please Refund."

Please return your document, along with a copy of this letter, within 30 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

Registration/Qualification Section
Division of Corporations Letter Number: 604A00013018

SECRETARY OF STATE DIVISION OF CORPORATION

is a North Committee on the entire three promise and making the formal in the terms of

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: | | |
|---|---|--------|
| The name of the Limited Liability Company is: | | |
| Vision Penewal Com | munications LLC | |
| ARTICLE II - Address: | | |
| The mailing address and street address of the princip | bal office of the Limited Liability Company is: | |
| Principal Office Address: | Mailing Address: | |
| 5530 Alden Bridge Dr. | Same | |
| Jacksonville, Fl. 32058 | · - | |
| attn: Nasmi Frizzell | | |
| | MAR | |
| ARTICLE III - Registered Agent, Registered Off The name and the Florida street address of the registered | iered agent are: | : 9 |
| | PH 12: | F |
| <u> NaomiAFrizza</u> | RATIO | |
| Name | 6 유···· | |
| | ridge Dr. | |
| Florida street address (P.O. Bo: | (NOT acceptable) | |
| Jacksonville | FLORIDA, 32258 | |
| City, State, and Z | Sip - | |

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, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: "MGR" = Manager "MGRM" = Managing Member MGRM Pardia Vizze (San Alden Bridge Dr. Jan Bolly life, Fl. 9005 (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. REQUIRED SIGNATURE:

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Signature of a member or anjanthorized 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

Typed or printed name of signee

that the facts stated herein are true.)