

Florida Department of State

Division of Corporations
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To:

Division of Corporations

Fax Number

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From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335 Phone: (305)599-0839

Fax Number : (305)716-0346

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SECHE SATE OF STATE
ALLAHASSEE, FLORIDA

04 MAY 20 AM 7: 25
VISION OF CORPORATION

LIMITED LIABILITY COMPANY

Jack J. Sally, LLC

Certificate of Status	0
Certified Copy	1
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Pursuant to s.608.407, Florida Statutes)

ARTICLE I - NAME

The name of the Limited Liability Company is:

Jack J. Sally, LLC

ARTICLE II - ADDRESS

The mailing address of the principal office is:

9422 Temple Avenue Seminole, FL 33772

ARTICLE III - REGISTERED AGENT

The name and address of the registered agent are:

Jack J. Sally III 9422 Temple Avenue Seminole, FL 33772

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 inclusive 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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Signature of Regis

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by the members and the name and address of the managing member is:

Jack J. Sally III 9422 Temple Avenue Seminole, FL 33772

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 within are true.

nature of Member/Manager/ 05/20