

Florida Department of State

Division of Corporations **Public Access System**

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H04000151495 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

: (850)205-0383 Fax Number

From:

Account Name : FILINGS, INC. Account Number : 072720000101 (850) 385-6735 (954) 641-4192

Fax Number

LIMITED LIABILITY COMPANY

VISIONARY PROFESSIONAL PRODUCTS, LLC

0
0
01
\$125.00

Electronic Fling Name

Comenta Filipa

Public Access Holo

https://efile.sunbiz.org/scripts/efilcovr.exe

7/22/04

H04000151495

Į,

ARTICLES OF ORGANIZATION

VISIONARY PROFESSIONAL PRODUCTS, LLC

A Limited Liability Company
Organized under the Laws of the State of Florida

ARTICLE 1 - NAME

The name of the limited liability company is:

VISIONARY PROFESSIONAL PRODUCTS, LLC

ARTICLE II – ADDRESS

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

7322 NW 18th Ct. Pembroke Pines, Florida 33024

ARTICLE III - REGISTERED AGENT AND OFFICE

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

William S. DeHart 7322 NW 18th Ct. Pembroke Pines, Florida 33024

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.

WILLIAM S. DE HART, as Registered Agent

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 herein are true.

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

H04000151495