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GECRETARY OF STATE TALLAHASSEE, FLORIDA

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VISION OF CORPORATION

LIMITED LIABILITY COMPANY

- G & V REALTY ASSOCIATES, LLC

| Certificate of Status | 0 |
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| A MARIE OF THE TAIL | TALLAHASS | |
|---|--|--|
| ARTICLE I - Name: The name of the Limited Liability Company is | : | |
| C & V Realty Associates, LLC | | |
| ARTICLE II - Address: The mailing address and street address of the p | orincipal office of the Limited Liability Company | |
| Principal Office Address: | Mailing Address; | |
| c/o Bernard H. Vogel | c/o Bernard H. Vogel | |
| 33 Willis Avenue, Suite 200 | 33 Willis Avenue. Suite 200 | |
| Minepla, NY 11501 | | |
| Bernard H. Vo | ' | |
| Bernard H. Vo Name 17177 Northwa | ogel o ay Circle | |
| Bernard H. Vo Name 17177 Northwa | pgel o | |
| Bernard H. Vo Name 17177 Northwa Florida street ac | ogel o ay Circle | |
| Bernard H. Vo Nerro 17177 Northwa Florida street at Boca Raton City, State, Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete p | opel o y Circle idress (P.O. Box NOT acceptable) | |
| Bernard H. Vo Nerro 17177 Northwa Florida street at Boca Raton City, State, Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete p | of Circle ideas (P.O. Box NOI acceptable) FI. 33496. and Zip accept service of process for the above stated limit this certificate, I hereby accept the appointment and the interpretation of the provisions of | |
| Bernard H. Vo Name 17177 Northwa Floride street at Roca Raton City, State, Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p accept the obligations of my position as reg | of Circle idices (P.O. Box NOT acceptable) FI. 33496 accept service of process for the above stated a this certificate, I hereby accept the appointmenty. I further agree to comply with the provision performance of my duties, and I am familiar with the provided for in Chapter 608, and I agree to general agent as provided for in Chapter 608, and I am familiar with the provided for in Chapter 608, and I am familiar wit | |

Page 1 of 2

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| ARTICLE IV-Manager(s) or Manage The name and address of each Manage | | FILED |
|--|--|--------------------|
| Title: | Name and Address: | |
| "MGR" = Manager | | 2005 APR 21 A 10: |
| "MGRM" = Managing Member | | |
| MGR# | Bernard H. Vogel 33 Willis Avenue, Suite 200 | SECRETARY OF STATE |
| | Mineola, NY 11501 | |
| MCRM | Frank Gutman 12 Orchard Lane | |
| | Old Westbury, NY 11568 | <u>.</u> |
| | | |
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| | | |
| (Use attachment if necessary) | | |
| • | | |
| NOTE: An additional article must be | be added if an effective date is requested. | |
| REQUIRED SIGNATURE: | | |
| | | |
| Signature of a momber | or an authorized representative of a member. | |
| (In accordance with second of this document constit | tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury | |
| that the facts stated he | erein arc true.) | |

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Typed or printed name of signee

BERNARD H. VOGEL