

L05000045045

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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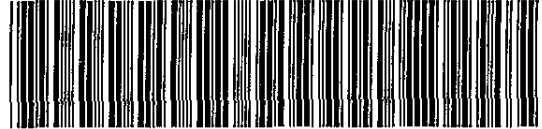
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

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TRANSMITTAL LETTER

**TO: Registration Section
Division of corporations**

**SUBJECT: Visual Intelligent Devices of Florida, L.L.C
[Name of Limited Liability Company]**

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Iris Berke

(Name of Person)

Professional Tax Service

(Firm/Company)

876 Gardenia Drive

(Address)

Royal Palm Beach, FL 33411

(City, State, Zip Code)

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For Further information concerning this matter, please call:

Iris Berke at **561-385-5381**

(Name of Person) (Area Code & Daytime Phone Number)

Street Address:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

April 21, 2005

IRIS BERKE
PROFESSIONAL TAX SERVICE
876 GARDENIA DRIVE
ROYAL PALM BEACH, FL 33411

SUBJECT: VISUAL INTELLIGENT DEVICES OF FLORIDA, L.L.C.
Ref. Number: W05000020240

We have received your document for VISUAL INTELLIGENT DEVICES OF FLORIDA, L.L.C. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

In order to form an LLC you must file "Articles of Organization." Our blank form for this is enclosed. Please note that we do not file "Operating Agreements" or "Information Sheets."

Please return your document, along with a copy of this letter, within 60 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
Document Specialist

Letter Number: 405A0002748

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TALLAHASSEE FLORIDA

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

ARTICLE 1 – Name:

The name of the Limited Liability Company is:

Visual Intelligent Devices of Florida, L.L.C

ARTICLE II – Address:

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

Principal Office Address:

14271 Temple Blvd
Loxahatchee, FL 33470

Mailing Address:

14271 Temple Blvd
Loxahatchee, FL 33470

ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature

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

Derrick Allen

Name

14271 Temple Blvd
Loxahatchee, FL 33470

City, State, Zip

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

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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

Name and Address:

MGRM

Derrick Allen

14271 Temple Blvd

Loxahatchee, FL 33470

Age Group	Percentage
18-24	10
25-34	20
35-44	25
45-54	20
55-64	15
65-74	10
75-84	5
85+	5

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(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Signature of a member or an authorized 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 that the facts stated herein are true.)

x

Derrick Allen

Typed or printed name of signee

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