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COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: VISION FUND Management, LLC Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
JULIE SCHULZ						
Name of Person						
SUMMIT GROUP MANAGEMENT, LLC Firm/Company						
3427 BANNERMAN ROAD, SUITE D208						
Address						
TALLAHASSEE FL 32312 City/State and Zip Code						
julie.schulz@summitgroup.biz E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
TVI TT GGWYT 5						
JULIE SCHULZ at (850) 219-8207 Name of Person Area Code & Daytime Telephone Number						
STREET/COURIER ADDRESS: MAILING ADDRESS:						
Registration Section Registration Section						
Division of Corporations Division of Corporations						
Clifton Building P.O. Box 6327						
2661 Executive Center Circle Tallahassee, Florida 32314						
Tallahassee, Florida 32301						
Enclosed is a check for the following amount:						
▼ \$25 Filing Fee						

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	N	lame of the limited liability company: $\sqrt{151}$ DM_	Fun.	d M	anagem <i>e</i>	nt, L	<u>. </u>
		3427 BANNERMAN ROAD Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			BANNERMAN F Mailing address of lit (Note: MAY BE I	ROAD mited liability	
		SUITE_D208		_SUIT	E 105-428		
		TALLAHASSEE FL 32312		TALL	AHASSEE FL	32312	
		2 14/2007		<u>_</u>	070000	176	10
3.		Date of filing/registration in Florida	4.		Document numb	ber	
5.	(a) SUMMIT GROUP INTERNATIONAL MAN. Registered Agent and Registered Office shown on the records of _2073_SUMMIT_LAKE_DRIVE				SECR FALLEN	
		Registered Office Address (MUST BE FLORIDA STREET	<u>ADDRESS</u>				2
		SUITE 155				公共 	AT EMELL TY LORDS
		TALLAHASSEE, FI	L_3231	.7			Exercise Exercise
	(b)				OK	7: 01	E Walter of
	(0)	Enter name of NEW Registered Agent and/or NEW Registered			(<u>_</u>		
		2427 DANNEDMAN DOAD CUITME DOA	n				
		3427 BANNERMAN ROAD, SUITE D20 NEW Registered Office Address:	0				
							
		TALLAHASSEE ,FI	L 3231	2			
1£	tha						41 Ca
the ag	e ch ent as/v	limited liability company is not organized under the la lange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited li- vere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	f the regis iability co of the lim	tered offi mpany, it ited liabil	ice and the busines t is hereby confirm lity company or as	ss office of the	he registered change(s)
_	G.	Milliam		CLAUI	DE R. WALKE		-
	_	nature of a member or authorized representative of a member	rvaa ta aat	in this or	Printed or typed na		م باد ماند براس
pr th to	ovi. e ol me	eby accept the appointment as registered agent and ag sions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, led in writing of this change.	gree to act e perform ed for in C hereby co	in inis cu ince of m Chapter 6 onfirm tha	ipacity. I juriner a y duties, and I am 05, F.S. Or, if this at the limited liabil	igree to com Jamiliar wit document i. lity company	pty with the h and accept s being filed has been
S	ignat	ture of Registered Agent					

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00