

107000032544

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer: W07-10489

023

Office Use Only

EFFECTIVE DATE 3-1-07



800089676818

02/28/07--01038--023 **130.00

FILED
07 FEB 28 PM 2:22
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DB

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Native Vision Business Development
(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:

Jerry Edler
(Name of Person)

Native Vision Business Development
(Firm/Company)

1101 SE 17th Street
(Address)

Cape Coral, FL 33990
(City/State and Zip Code)

For further information concerning this matter, please call:

Jerry Edler at (239-574-7865)
(Name of Person) (Area Code & Daytime Telephone Number)

07 FEB 28 PM 2:22
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 1, 2007

JERRY EDLER
1101 SE 17TH STREET
CAPE CORAL, FL 33990

SUBJECT: NATIVE VISION BUSINESS DEVELOPMENT
Ref. Number: W07000010489

07 FEB 28 PM 2: 22
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

We have received your document for NATIVE VISION BUSINESS DEVELOPMENT and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "Limited Company" or Limited Liability Company or with one of the following abbreviations Ltd. Co., LC, "L.C.," LLC, or L.L.C.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6984.

Deborah Bruce
Document Specialist

Letter Number: 207A00014854

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Native Vision Business Development, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

1101 SE 17th Street Cape Coral, FL 33990

1101 SE 17th Street Cape Coral, FL 33990

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Jerry Edler

Name

1101 SE 17th Street

Florida street address (P.O. Box **NOT** acceptable)

Cape Coral

FL 33990

City, State, and Zip

07 FEB 28 PM 2:23
SECRETARY OF STATE
TALLAHASSEE FLORIDA
FILED

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.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

EFFECTIVE DATE 3-1-07

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:

Jerry Edler

mgrm

1101 SE 17th Street

Cape Coral, FL 33990

Billy Horton

mgrm

9302 Doliver

Austin, TX 78745

Don Nicolini

mgrm

8512 Wareham Drive

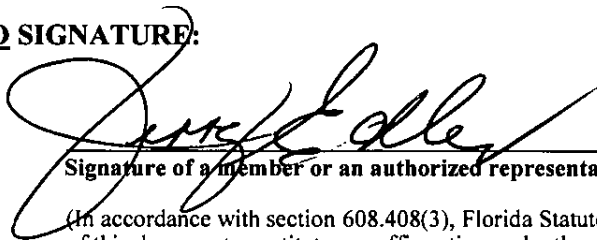
Plano, TX 75024

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: March 1, 2007. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

Jerry Edler

Typed or printed name of signee

FILED
07 FEB 28 PM 2:23
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)