

L07000098725

(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:

Office Use Only



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09/21/07--01005--025 \*\*155.00

RECEIVED

07 SEP 21 AM 11:46

RECORDS & REGISTRATIONS  
DIVISION  
TALLAHASSEE, FLORIDA

FILED

07 SEP 27 PM 3:07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ATTORNEYS' TITLE

Requestor's Name

1965 Capital Circle NE, Suite A

Address

Tallahassee, FL 32308

City/St/Zip

850-222-2785

Phone #

**FILED**  
07 SEP 27 PM 3:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1- VISION TRUCKING, LLC

2-

3-

4-

☒ Walk-in

☐ Pick-up time ASAP

☒ Certified

☐ Mail-out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

#### NEW FILINGS

<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

#### AMENDMENTS

<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

#### OTHER FILINGS

<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

#### REGISTRATION/QUALIFICATION

<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 21, 2007

ATTORNEY'S TITLE

TALLAHASSEE, FL

SUBJECT: VISION TRUCKING, LLC  
Ref. Number: W07000046957

RECEIVED  
07 SEP 27 AM 11:22  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

We have received your document for VISION TRUCKING, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

FILED  
07 SEP 27 PM 3:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Please note that we have RETAINED your \$155.00 payment.

Item 3 identifies the registered agent as being "FRANK KELLEY", but the R.A. acceptance statement identifies the R.A. as being "OVA F. KELLY".

Please clarify and/or correct.

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) 245-6914.

Buck Kohr  
Document Specialist

Letter Number: 707A00055733

ARTICLES OF ORGANIZATION  
OF  
VISION TRUCKING, LLC

FILED  
07 SEP 27 PM 3:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

These Articles of Organization are made for the purpose of organizing a Florida Limited Liability Company under the Florida Limited Liability Company Act (Florida Statutes Chapter 608).

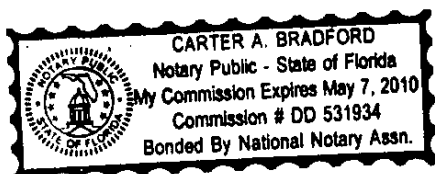
1. Name. The name of this limited liability company is Vision Trucking, LLC ("Company").
2. Mailing Address and Street Address of Principal Office. The Company's mailing address is 2700 N. Peninsula Avenue, #321, New Smyrna Beach, Florida, 32169. The Company's street address is 2700 N. Peninsula Avenue, #321, New Smyrna Beach, Florida.
3. Registered Agent and Office. The name of the initial registered agent of the Company is Ova F. Kelly. The street address of the initial registered agent of the Company is 2700 N. Peninsula Avenue, #321, New Smyrna Beach, Florida, 32169.
4. Operating Agreement. The members shall have the power to adopt, alter, amend, or repeal an Operating Agreement for the Company containing provisions for the regulation and management of the affairs of the Company.
5. Date of Existence of the Company. The existence of the Company shall commence on the date of filing the Articles of Organization by the Florida Department of State.

The undersigned executed these Articles of Organization on September 27, 2007.

  
\_\_\_\_\_  
Ova F. Kelly

STATE OF FLORIDA  
COUNTY OF ORANGE

The foregoing instrument was acknowledged before me, on September 24, 2007, by Ova F. Kelly, who ☒ is personally known to me or who ( ) has produced \_\_\_\_\_ as identification.



  
\_\_\_\_\_  
Notary Public


Print Name: \_\_\_\_\_

My Commission Number: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

ACCEPTANCE OF REGISTERED AGENT

Having been named in Paragraph 3 as Registered Agent to accept service of process for this Limited Liability Company at the place designated in Paragraph 3, 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.

  
\_\_\_\_\_  
Ova F. Kelly

Dated: September 24, 2007.