

LO7000113597

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

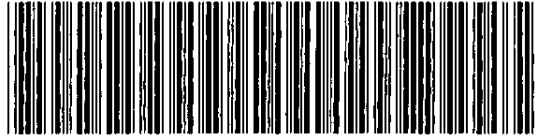
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

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**SMITH & STONESTREET, P.A.**

**ATTORNEYS AT LAW**

150 S. Hwy. 17-92, Suite 2

DeBary, Florida 32713

Mailing Address:

P.O. Box 530144

DeBary, Florida 32753-0144

(386) 668-4451

Fax (386) 668-1938

Daphne Stonestreet

November 6, 2007

Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Re: Vision Trip Media, LLC

Dear Sir/Madam:

Enclosed please find Articles Of Vision Trip Media, LLC for filing regarding the above referenced corporation. A check made payable to Department of State in the amount of \$100.00 is enclosed to cover your fee and a check made payable to Department of State in the amount of \$25.00 to cover the registered agent fee along with a stamped, self-addressed envelope for return mailing.

If you have any questions, please do not hesitate to contact our office.

Sincerely,



Daphne Stonestreet



DS/dm  
Enclosures

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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION**

**OF**

**VISION TRIP MEDIA, LLC**

WE, THE UNDERSIGNED, being natural person(s) of legal age, hereby desire to form a Limited Liability Company under the laws of the state of Florida, and hereby adopts the following Articles of Organization.

**ARTICLE I**

**NAME**

The name of the Limited Liability Company shall be VISION TRIP MEDIA, LLC.

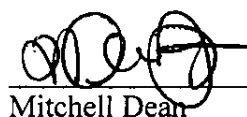
**ARTICLE II**

The mailing address of the principal office of the Limited Liability Company is, 299 Falling Leaf Lane, Casselberry, Florida 32707 and the physical address is 299 Falling Leaf Lane, Casselberry, Florida 32707.

**ARTICLE III**

The name and the Florida street address of the registered agent is: Mitchell Dean, 299 Falling Leaf Lane, Casselberry, Florida 32707.

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.


  
\_\_\_\_\_  
Mitchell Dean


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TALLAHASSEE, FLORIDA

ARTICLE IV

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager – managed company.


The managers are:


  
\_\_\_\_\_  
Mitchell Dean  
299 Falling Leaf Lane  
Casselberry, Florida 32707

  
\_\_\_\_\_  
Michael Lord  
299 Falling Leaf Lane  
Casselberry, Florida 32707

STATE OF FLORIDA  
COUNTY OF Orange


The foregoing instrument was acknowledged before me this 19 day of October, 2007, by Mitchell Dean, who is personally known to me or who has produced Florida Drivers Licence as identification and who did take an oath.

NOTARY PUBLIC-STATE OF FLORIDA  
 Yagnesh Patel  
Commission # DD538869  
Expires: MAY 21, 2010  
Bonded Thru Atlantic Bonding Co., Inc.

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

STATE OF FLORIDA  
COUNTY OF Orange

The foregoing instrument was acknowledged before me this 19 day of October, 2007, by Michael Lord, who is personally known to me or who has produced FL Drivers Licence as identification and who did take an oath.

NOTARY PUBLIC-STATE OF FLORIDA  
 Yagnesh Patel  
Commission # DD538869  
Expires: MAY 21, 2010  
Bonded Thru Atlantic Bonding Co., Inc.

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

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