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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Smart-Traveler
Vision, LLC

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- ☐ Art of Inc. File
- ☐ LTD Partnership File
- ☐ Foreign Corp. File
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- ☐ Fictitious Name File
- ☐ Trade/Service Mark
- ☐ Merger File
- ☐ Art. of Amend. File
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- ☐ Dissolution / Withdrawal
- ☐ Annual Report / Reinstatement
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- ☐ Certificate of Status
- ☐ Certificate of Fictitious Name
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- ☐ Officer Search
- ☐ Fictitious Search
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
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- ☐ UCC 1 or 3 File
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Seth

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ARTICLES OF ORGANIZATION FOR

Smart-Traveler Vision, LLC

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CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

The undersigned, for the purpose of forming a company under the Florida Limited Liability Act, hereby adopts the following Articles of Organization.

ARTICLE I: NAME

The name of the company is **Smart-Traveler Vision, LLC**

ARTICLE II: PRINCIPAL OFFICE

The principal office and mailing address of the company is **11303 NW 5th Street, Coral Springs, Florida 33071**


ARTICLE III: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is **Hamby Hutcheson, 11303 NW 5th Street,
Coral Springs, Florida 33071**

ARTICLE IV: MANAGING MEMBERS & MEMBERS

The name and address of the initial Managing Members and Members of the company are:
Hamby Hutcheson, Managing Member, 11303 NW 5th Street, Coral Springs, Florida 33071

The undersigned has executed these Articles of Organization this 27th day of August 2009.
"Your Capital Connection, Inc. by, Seth Neeley, Client Representative"




Authorized Representative

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 608.415, Florida Statutes, the mentioned limited liability company, organized under the laws of the State of Florida, submits the following statement in designating the registered agent and registered office, in the state of Florida.

1. The name of the company is: **Smart-Traveler Vision, LLC**
2. The name and address of the registered agent and office is: **Hamby Hutcheson,
11303 NW 5th Street, Coral Springs, Florida 33071**

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED 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.


Hamby Hutcheson