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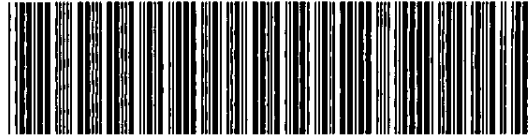
(Business Entity Name)

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MAR -2 2012

T. HAMPTON

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: NATURE'S VISION LANDSCAPING LLC
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:

JOSE SILVA

Name of Person

NATURES VISION LANDSCAPING LLC

Firm/Company

P O BOX 811

Address

HAINES CITY, FL 33845

City/State and Zip Code

MARIA.FERRETIZ@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSE SILVA

Name of Person

at (**863**) **326-3192**

Area Code & Daytime Telephone Number

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

**Articles of Organization
For
Florida Limited Liability Company**

Article I- Name

The Name of the corporation shall be:

Nature's Vision Landscaping LLC

Article II

The address of the principal office of this Limited Liability Company is:

3642 Huntwicke Blvd, Davenport, Fl 33837

The mailing address of the Limited Liability Company is:

P.O. Box 811 Haines City, Fl 33845

Article III

Purpose for which this Limited Liability Company is organized is:

Landscaping , Tree service Any and All Lawful Business

Article IV- Registered Agent

The name, title, and Florida street address of the registered agent is:

**MGR- Jose Silva
3642 Huntwicke Blvd
Davenport, Fl 33837**

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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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: Jose Silva
Jose Silva/ Agent

Article V- Members/ Managers

The name and address of managing members/managers are:

MGR- Jose Silva
3642 Huntwicke Blvd
Davenport, FL 33837

MGMR- Maria Ferretiz
118 Richmar Ave South
Haines City, FL 33844

Article VI

The effective date for this Limited Liability Company shall be:

03/01/2012

Signature of member or an authorized representative of L.L.C

Signature: Jose Silva
Jose Silva/ Agent

Jose Silva
Registered Agent's Signature

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