L140000 16605

(Requestor's Name)	_
(Address)	
(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
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Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	٦
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Office Use Only



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Effective Date 1/15/14

SECRETARY OF STATE
DIVISION OF CORPORATIONS



COVER LETTER

TO:	Registration Section Division of Corporations
SUBJEC	D VISION LLC
SOBJEC	Name of Limited Liability Company
The enclo	osed Articles of Organization and fee(s) are submitted for filing.
Please ret	turn all correspondence concerning this matter to the following:
	DEBORAH D STEWART
•	Name of Person
	D VISION LLC
	Firm/Company
	1008 PINEVIEW BLVD UNIT L
	Address CODE NAVALED DE A CUI. EL CODE 47
	FORT WALTON BEACH, FL 32547
	City/State and Zip Code N/A
	E-mail address: (to be used for future annual report notification)
	r information concerning this matter, please call:
DEBO	RAH D. STEWART 850 974-7387
	Name of Person Area Code Daytime Telephone Number
Enclosed i	is a check for the following amount:
\$125.00 F	Siling Fee \$\sum_{\text{Certificate of Status}}\$155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)}\$\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

Effective Date 1115114

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
• • · · · · · · · · · · · · · · ·	ed Liability Company is:	
D VISION LLC		
. (1)	Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Addres	•	
The mailing address an	nd street address of the principal office of the Limited Liability Company is:	
Principal Office Addr	ress: Mailing Address:	
1008 , PINEVIEW BLVI	1008 PINEVIEW BLVD Unit E	
FORT WALTON BEACH,	1, FL 32547 FORT WALTON BEACH, FL 32547	
(The Limited Liability of another business entity	stered Agent, Registered Office, & Registered Agent's Signature: Company cannot serve as its own Registered Agent. You must designate an individu y with an active Florida registration.)	al or
The name and the Flori	ida street address of the registered agent are:	
	DEBORAH D STEWART	
	Name	
	1008 PINEVIEW BLVD Unit E	
	Florida street address (P.O. Box <u>NOT</u> acceptable)	
	FORT WALTON BEACH FL 32547	
	City Zip	

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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

	Title: "AMBR" = Authorize	d Member	Name and Address:
	"MGR" = Manager		DEPORTURE OFFICIAL DE
	"AMBR" 100%		DEBORAH D STEWART
			1008 PINEVIEW BLVD CANTE
			TOTAL TOTAL DELICATION OF THE COLUMN TOTAL DELICATION OF THE C
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		-	
	•		
	(Use attachment if nec	essarv)	
efi	LE V: Effective date, if fective date is listed, the of filing.)	other than the date of fi e date must be specific	ling: JANUARY 15, 2014 (OPTIONAL) c and cannot be more than five business days prior to or 90 days
efi te	fective date is listed, the of filing.) LE VI: Other provisions	e date must be specific , if any.	ling: JANUARY 15, 2014 (OPTIONAL) c and cannot be more than five business days prior to or 90 days
f e	fective date is listed, the of filing.) LE VI: Other provisions	e date must be specific	ling: JANUARY 15, 2014 (OPTIONAL) c and cannot be more than five business days prior to or 90 days
efi e	fective date is listed, the of filing.) LE VI: Other provisions	e date must be specific	ling: JANUARY 15. 2014 (OPTIONAL) c and cannot be more than five business days prior to or 90 days

Typed or printed name of signee

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)

constitutes a third degree felony as provided for in s.817.155, F.S.)

DEBORAH D STEWART

ARTICLE IV-

Page 2 of 2