

Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : TRIAD PROFESSIONAL SERVICES
Account Number : I20160000008
Phone : (850) 777-2091
Fax Number : (770) 220-1943

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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FLORIDA LIMITED LIABILITY CO.**Avi8ion, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

**ARTICLES OF ORGANIZATION
OF
AVISION, LLC
(a Florida limited liability company)**

Pursuant to Florida Statutes §605.0201, the undersigned hereby submits the following Articles of Organization of AVISION, LLC for the purpose of forming a limited liability company under the laws of the State of Florida.

ARTICLE I.

Name

The name of the Limited Liability Company is "AVISION, LLC" (the "Company").

ARTICLE II.

Principal Office and Mailing Address

The mailing address and street address of the principal office is 2740 SW Martin Downs Blvd., Suite 428, Palm City, FL 34990.

ARTICLE III.

Registered Agent

The name of the initial registered agent of the Company is NRAI Services, Inc., and the street address of the Company's initial registered agent is 1200 South Pine Island Road, Plantation, FL 33324.

These Articles of Organization are hereby executed by the undersigned Authorized Representative of the Company this 29th day of January, 2018.

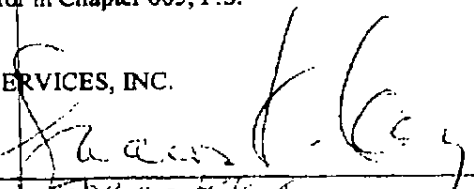


William Stein
Authorized Representative

Acceptance of Appointment of Registered Agent

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.

NRAI SERVICES, INC.

By: 
Name: Sharon K. Kelly
Title: Assistant Secretary