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W19-77651



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 28, 2018

PEDRO I. VAZQUEZ MORALES 6660 NW 105TH PL DORAL, FL 33178 US

SUBJECT: GNOSTICC VISION LLC

Ref. Number: W18000077651

We have received your document for GNOSTICC VISION LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

YOU MUST PICK A TITLE FOR THE AUTHORIZED PERSON(S) SECTION. TITLES INCLUDE "AMBR", "MGR", "AR", AND "AP".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Taylor B Collins Regulatory Specialist II

G

Letter Number: 118A00017839

AKTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is.

Gnostice Vision LLC
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
6660 NW 105th PI	6660 NW 105th Pl
Doral, FL,	Doral, FL,
33178	33178

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are.

Pedro I. Vazquez M	orales	
	Name	
6660 NW 105th Pl.		
Florida street addres	ss (P.O. Box <u>NOT</u> ac	cceptable)
Doral,	FL	33178
City	State	Zip

Having been named as registered agent and to accept service of process for the above stated limited hability 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)

18 SEP 10 AM 10: 10

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	0.1.1.1
	Pedro I. Vazquez Morales
	6660 NW 105th PI
	Doral, FL, 33178
	
	
(Use attachment if necessary)	
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