

## Florida Department of State

Division of Corporations  
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## To:

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

## From:

Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.  
Account Number : 072720000036  
Phone : (407) 843-4600  
Fax Number : (407) 843-4444

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

Email Address: \_\_\_\_\_

## FLORIDA LIMITED LIABILITY CO.

## VONIX, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

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JUN 17 2019

T. COOPER

ARTICLES OF ORGANIZATION  
OF  
VONIX, LLC

ARTICLE I - NAME

The name of this limited liability company is Vonix, LLC (the "Company").

ARTICLE II - PRINCIPAL OFFICE

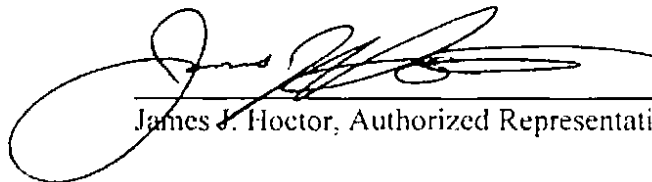
The mailing address of the Company, and the street address of the principal office of the Company, is 617 Oak Circle, Oviedo, Florida 32765

ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 215 North Eola Drive, Orlando, Florida 32801, and the name of the initial registered agent of the Company at that address is James J. Hctor.

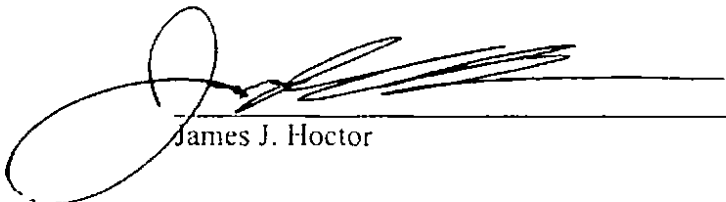
ARTICLE IV - MANAGEMENT

The Company is a manager-managed limited liability company, and the initial managers of the Company are Christian J. King, Valerie M. Thompson and Jessica L. Duncan.

  
James J. Hctor, Authorized Representative

ACCEPTANCE 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, Florida Statutes.

  
James J. Hctor

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FILED  
TALLAHASSEE, FL

**Scott, Tyrone K.**

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**From:** Andre, Gail <Gail.Andre@lowndes-law.com>  
**Sent:** Monday, June 17, 2019 10:44 AM  
**To:** Scott, Tyrone K.  
**Subject:** VONIX, LLC  
**Attachments:** 20190617094011.pdf

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**EMAIL RECEIVED FROM EXTERNAL SOURCE**

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The attachments/links in this message have been scanned by Proofpoint.

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Tyrone, please file with a filing date of June 12, 2019, and return a certification to me as soon as possible. Thank you for your assistance.

Gail S. André  
*Florida Registered Paralegal*  
215 North Eola Drive  
Orlando, Florida 32801  
D: 407.418.6203 | P: 407.843.4600  
[gail.andre@lowndes-law.com](mailto:gail.andre@lowndes-law.com)  
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