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FLORIDA LIMITED LIABILITY CO.

Vision Fund, LLC

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

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AUG 6 2019

ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

ARTIQLE I - NAME:

The name of the limited liability company is: Vision Fund, LLC

ARTICLE II - ADDRESS:

The malling address and the street address of the principal office of the Limited Liability Company

Principal Office Address: 2051 NW 112 Avenue, Suite 114, Miami, FL 33172

Mailing Address: 2051 NW 112 Avenue, Suite 114, Miami, FL 33172

ARTICLE III – REGISTERED AGENT, REGISTERED OFFICE AND SIGNATURE The name and Florida street address of the registered agent are:

Perla Sole Calas, PA 14750 NW 7th Court Suite 300 Miami Lakes, FL 33016

ARTICLE IV - MANAGERS

The name and address of each person authorized to manage and control the Limited Liability Company:

Title Nam

Manager

Ihonny Aslan 10267 N

Manager Miguel Angel Gonzales

10267 NW 75th Ter., Doral, FL 33178 4500 Lake Rd., Miami, FL 33137

ARTICLE V - EFFECTIVE DATE

Effective date if other than date of filing:

ARTICLENVY OTHER PROVISIONS

Signature of a member or authorized representative of a member

This document is executed in accordance with section 605.0203(1)(b) Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided in S. 817.155 F.S.

Typed or printed name of signee: _____ Jhonny Aslan______

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.Sc.

Registered Agent's Signature

SECRETARY OF STATE