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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

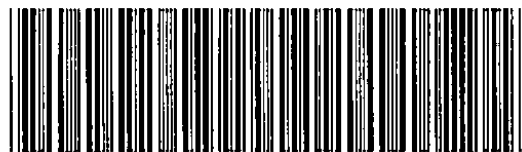
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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JUL 21 2020

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: DICENZO VISION, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Domestication **of a Non-U.S. Entity** and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CHRISTIAN PEREZ

Name of Person

DICENZO VISION, LLC

Firm/Company

16408 RUBY LAKE

Address

WESTON FL 33331

City/State and Zip Code

FONTROSA@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CHRISTIAN PEREZ

Name of Person

at (954)

Area Code

873-0923

Daytime Telephone Number

Mailing Address:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303


Articles of Domestication: \$25
Articles of Organization: \$125
Total to Domesticate and file: \$150

ARTICLES OF DOMESTICATION

In accordance with 605.1055, Florida Statutes, the Articles of Domestication are submitted for filing:

1. The date on which the entity was first formed was: January 07, 2010
2. The name of the entity immediately prior to the filing of the Articles of Domestication was:
DICENZO VISION, LTD.
3. Attached are Florida Articles of Organization to complete the domestication requirements pursuant to s. 605.0201.
4. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the entity or any other equivalent jurisdiction under applicable law, immediately before the filing of the Articles of Domestication was: British Virgin Islands
5. The domestication has been approved in accordance with the laws of the jurisdiction of formation of the domesticating entity.

I am authorized to sign these Articles of Domestication on behalf of the entity.



Authorized Signature

6. Attached is a certificate of status or equivalent document, if any, from the domesticating jurisdiction of formation of the entity pursuant to s. 605.1055 (3), Florida Statutes.

**TERRITORY OF THE BRITISH VIRGIN ISLANDS
BVI BUSINESS COMPANIES ACT, 2004**



3352C9658A

**CERTIFICATE OF GOOD STANDING
(SECTION 235)**

The REGISTRAR OF CORPORATE AFFAIRS, of the British Virgin Islands HEREBY CERTIFIE that, pursuant to the BVI Business Companies Act, 2004 at the date of this certificate, the company

Dicenzo Vision, Ltd.

BVI COMPANY NUMBER: 1564880

1. Is on the Register of Companies;
2. Has paid all fees and penalties due under the Act;
3. Has filed with the Registrar a copy of its register of directors which is complete;
4. Has not filed articles of merger or consolidation that have not become effective;
5. Has not filed articles of arrangement that have not yet become effective;
6. Is not in voluntary liquidation;
7. Is not in liquidation under the Insolvency Act, 2003;
8. Is not in receivership under the Insolvency Act, 2003;
9. Is not in administrative receivership; and
10. Proceedings to strike the name of the company off the Register of Companies have not been instituted.



REGISTRAR OF CORPORATE AFFAIRS

14th day of July, 20

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

DICENZO 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:

16408 Ruby Lake, Weston FL 33331

Mailing Address:

16408 Ruby Lake, Weston FL 33331

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:

Christian Perez

Name

16424 Ruby Lake

Florida street address (P.O. Box **NOT** acceptable)

Weston

FL

33331

City

Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company, 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 as registered agent and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

MGR

MGR

Name and Address:

Douglas Perez

16408 Ruby Lake

Weston, FL 33331

Rosa Font de Perez

16408 Ruby Lake

Weston, FL 33331

Christian Perez

16424 Ruby Lake

Weston, FL 33331

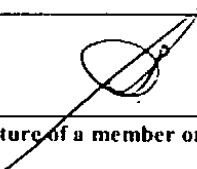
(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE: _____


Signature of a member or an authorized representative

(In accordance with section 605.0205 (3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Douglas Perez

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)