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Division of Corporations

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From:

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Account Number : 075500004387  
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**FLORIDA LIMITED LIABILITY CO.  
JAM VIP MANAGEMENT, LLC**

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**ARTICLES OF ORGANIZATION  
OF  
JAM VIP MANAGEMENT, LLC**

**ARTICLE I – Name:**

The name of the Limited Liability Company is JAM VIP MANAGEMENT, LLC.

**ARTICLE II – Address:**

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


1022 S. Sterling Avenue  
Tampa, Florida 33629

**ARTICLE III – Registered Agent and Office**

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

Michael H. Robbins  
101 E. Kennedy Boulevard  
Suite 2800  
Tampa, Florida 33602

*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.*

  
\_\_\_\_\_  
Signature of Registered Agent

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**ARTICLE IV – Management**

The Limited Liability Company is to be manager-managed by one or more managers as elected and provided for in the Operating Agreement of the Limited Liability Company. The name, title and address of the person authorized to manage and control the Limited Liability Company are:

| <b>Title</b> | <b>Name and Address</b>   |
|--------------|---|
| MGR          | HG VISION, LLC<br>1022 S. Sterling Avenue<br>Tampa, Florida 33629 |

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this 4<sup>th</sup> day of September 2023.

  
\_\_\_\_\_  
**Signature of a member or an authorized representative of a member**

(In accordance with section 605.0203(1)(b), 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 section 817.155, Florida Statutes)

Joseph Colucci  
\_\_\_\_\_  
**Typed or printed name of signee**