# CAPITAL CONNECTION III. 417 E. Virgini Street, Slite 1 • Tallahassee, Florida 32-32 (850) 224-8870 • 1-800-34-8062 • Fax (850) 222-1222

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1 ision V	BS, LLC	1000029568119 -08/11/3901037003 ****337.50 *****337.50
		Art of Inc. File  LTD Partnership File  Foreign Corp. File  L.C. File  Fictitious Name File  Trade/Service Mark  Merger File  Art. of Amend. File  RA Resignation  Dissolution / Withdrawal  Annual Report / Reinstatement  Cert. Copy  Photo Copy  Certificate of Good Standing  Certificate of Fictitious Name  Corp Record Search
Signature	M/8/1/94	Officer Search Fictitious Search Fictitious Owner Search
Requested by: Name	$\frac{8/11}{\text{Date}} = \frac{9:33}{\text{Time}}$	Vehicle Search
Walk-In	Will Pick Up	Courier

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY



#### ARTICLE I - NAME

The name of the Limited Liability Company is: VISION VBS, L.L.C.

#### **ARTICLE II - ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is: 350 West Hubbard Street, Suite 301, Chicago, IL 60610.

#### **ARTICLE III - DURATION**

The period of duration for the Limited Liability Company shall be: The period beginning upon the filing of this Articles of Organization and ending on December 31, 2048, unless terminated sooner in accordance with the terms of the Operating Agreement of the Limited Liability Company.

#### **ARTICLE IV - MANAGEMENT**

The Limited Liability Company is to be managed by the members and the name(s) and addresses(s) of the managing member(s) is/are:

Vision Capital, L.L.C. 350 West Hubbard Street, Suite 301 Chicago, IL 60610

### ARTICLE V - AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of Vision VBS, L.L.C. certifies:

- the above named limited liability company has at least one member;
- 2) the total amount of cash contributed by the member(s) is: \$\frac{100.00}{}

3) if any, the agreed value of the property other than cash contributed by member(s) is (A description of the property is attached and made a part hereto); and \$\frac{1}{2} \\
\frac{1}{2} \\
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#### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE VISION VBS, L.L.C.



PURSUANT TO THE PROVISION OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: VISION VBS, L.L.C.
- 2. The name and the Florida street address of the registered agent are:

Brian . Cooke, Esq. c/o Arnstein & Lehr 515 N. Flagler Dr., Suite 600 West Palm Beach, FL 33401

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.

Bridg I Cooke

Dated: