

L05216

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

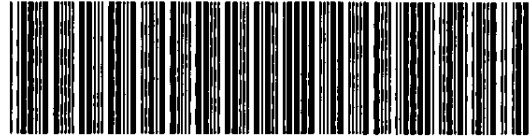
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
14 MAY 12 PM 4:12

cc/aus
Amend/Name
@ 5/21/14 chg

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: 20/20 Eye Care Network, Inc.
Formerly known as South Florida Vision of Palm Beach, Inc
DOCUMENT NUMBER: _____

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Patrice Coppola

Name of Contact Person

20/20 Eye Care Network, Inc.

Firm/ Company

190 North Compass Drive

Address

Fort Lauderdale, FL 33308

City/ State and Zip Code

pmc190ftl@aol.com

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

For further information concerning this matter, please call:

Patrice Coppola at (954) 917-2337 ex. 1024

Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

South Florida Vision of Palm Beach, Inc.

FILED
DIVISION OF CORPORATIONS
14 MAY 12 PM 4:12

(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

20/20 Eye Care Network, Inc.

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

*(Principal office address **MUST BE A STREET ADDRESS**)*

2900 West Cypress Creek Road

Suite 4

Fort Lauderdale, FL 33309

C. Enter new mailing address, if applicable:

*(Mailing address **MAY BE A POST OFFICE BOX**)*

N/A

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent N/A

N/A

(Florida street address)

New Registered Office Address: N/A, Florida
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

Change PT John Doe

Remove V Mike Jones

Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
2) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
3) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
4) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
5) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
6) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

During the Board of Director's Meeting on May 6, 2014, at 3:00pm, it was moved and
and unanimously agreed that South Florida Vision of Palm Beach, Inc. shall be
renamed to 20/20 Eye Care Network, Inc.

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

N/A

The date of each amendment(s) adoption: May 6, 2014, if other than the date this document was signed.

Effective date if applicable: May 6, 2014
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*


“The number of votes cast for the amendment(s) was/were sufficient for approval

by _____.”
(voting group)

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 5/6/14

Signature 

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Robert Coppola

(Typed or printed name of person signing)

Chief Executive Officer, Director, and Chairman

(Title of person signing)

**ATTACHMENTS RETURNED
NOT FILED IN THIS OFFICE**

SOUTH FLORIDA VISION

South Florida Vision of Palm Beach Board of Director's Meeting

May 6, 2014 at 3:00pm

Location: Corporate Headquarters

2900 West Cypress Creek Road. Suite 4, Fort Lauderdale, FL 33308

MINUTES:

Board Members:

Present: Robert Coppola- Chief Executive Officer
Patrice Coppola- Chief Financial Officer

Other's Present:

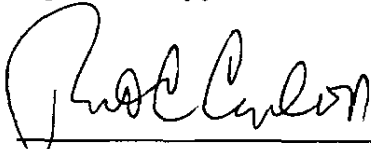
Ashley Felice- Chief Compliance Officer

Proceedings:


- Meeting called to order at 3:00pm by Chair, Robert Coppola
- It was moved and seconded that the minutes of the previous meetings have been approved and carried.
- Chief Executive Officer recommends changing our name to 20/20 Eye Care Network. It is pointed out that South Florida Vision of Palm Beach current name is too limiting in scope to market towards the rest of the state and changing the name would be beneficial.
- After brief discussion, all attendees agreed.
- It was then moved and unanimously agreed upon that South Florida Vision of Palm Beach shall name be renamed to 20/20 Eye Care Network.

Meeting Adjourned at 3:30pm

Signed and approved on this 6th day of May, 2014.



Robert Coppola, Chief Executive Officer



Patrice Coppola, Chief Financial Officer