N05000006174

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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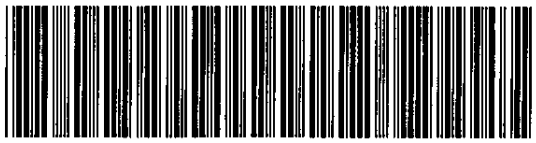

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DIVISION OF CORPORATIONS
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SHUMAKER
Shumaker, Loop & Kendrick, LLP

Bank of America Plaza
101 East Kennedy Boulevard
Suite 2800
Tampa, Florida 33602

813.229.7600
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RONALD A. CHRISTALDI
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rchristaldi@slk-law.com

October 1, 2007

Division of Corporations
Florida Department of State
Post Office Box 6327
Tallahassee, Florida 32314

Re: Lions Eye Institute for Transplant & Research Foundation, Inc.
Date of Incorporation: June 14, 2005
Document Number N05000006174
Change of Address of Registered Office

Dear Sir/Madam:

Enclosed is a Statement of Change of Registered Office or Registered Agent or Both for Corporations, which is submitted in order to change the address of the registered office for the above-referenced corporation. Also enclosed is Shumaker, Loop & Kendrick's Check Number 81086 payable to the Florida Department of State in the amount of $35.00 to cover the fee for this change. Thank you for your attention to this matter.

Sincerely,

Ronald A. Christaldi

RAC/jar
Enclosures (2)

cc: Jason K. Woody

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida *in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: Lions Eye Institute for Transplant & Research Foundation, Inc.

2. The principal office address: 1410 21st Street, Tampa, FL 33605

3. The mailing address (if different):

4. Date of incorporation/qualification: 06/14/2005 Document number: N05000006174

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Ronald A. Christaldi

101 E. Kennedy Blvd., Suite 3400

Tampa, FL 33602

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6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Ronald A. Christaldi

101 E. Kennedy Blvd., Suite 2800
(P.O. Box NOT acceptable)

Tampa, FL 33602

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

(Signature of an officer or director)

JASON K. WOODY PRESIDENT/CEO
(Printed or typed name and title)

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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

(Signature of Registered Agent)

9/25/07
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

*** * * FILING FEE: $35.00 * * ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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