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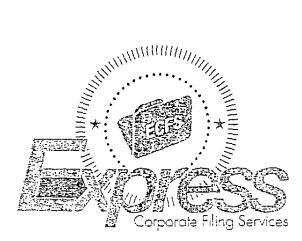
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Examiner's Initials

## CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

OPTI-K, =	INC.
(Corporation Name)	(Document #)
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NEW FILINGS	AMENDMENTS
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Limited Liability	Change of Registered Agent
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Other	Merger
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OTHER FILNGS	REGISTRATION/
Annual Report	QUALIFICATION
Fictitious Name	Foreign
Name Reservation	Limited Partnership

Reinstatement

Trademark

Other



September 14, 2012

**EXPRESS** 

SUBJECT: OPTI-K, INC.

Ref. Number: W12000047482

We have received your document for OPTI-K, INC. and your check(s) totaling \$157.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tim Burch Regulatory Specialist II New Filing Section

Letter Number: 012A00023157

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

	NAME : rporation shall be: OPTI-K, Inc.		
ARTICLE II	PRINCIPAL OFFICE Principal street address		Mailing address, if different is:
- - -	9646 Coral Way Miami, FL 33185		
ARTICLE III The purpose for w	PURPOSE hich the corporation is organized is:		
Eye glasse	s & contact lens retail.		
The number of shar	us of stack is:	<b>.</b>	
	INITIAL OFFICERS AND/OR DIRECTO  Lose A. Conesa, Presider  123 Ocean Shores DR.  Key Largo, FL 33037	Name and Title Address:	
Name and Tit Address:	le: Orivelsi Urtate, VP & SE( 123 Ocean Shores DR. Miami, FL 33037		
Name and Tit Address:	le:	Address:	
	REGISTERED AGENT ida street address (P.O. Box NOT acceptable) o	of the registered age:	nt is:
Name: Address:	Avel A. GOnzalez 2688 S.W. 137 Avenue Miami, FL 33175	<del></del>	
	INCORPORATOR ress of the Incorporator is:		
Name: Address:	Jose A. Conesa 123 Ocean Shores DR. Key Largo, FL 33037	<del>-</del> 	
	d as registered agent to accept service of proces familiar with and accept the appointment as reg		
	Required Signature/Registered Auco		09/12/2012 Date
I submit this docum document to the Dep	nent and officer that the facts stated herein are ourtment of State constitutes a third hegree felor	e true. I am aware ny as provided for in	that the false information submitted in a s.817.155, F.S.
	Research Signature/Incorporator	<del></del>	09/12/2012 Date

		INCORPORATION 07 and/or Chapter 621, F.S. (Pi	FILED
ARTICLE III P	orntion shall be: OPTI-K, Inc.  PRINCIPAL OFFICE  Principal street address 9646 Coral Way  Miami, FL 33185		12 SEP 14 PM 12: 11 SECRETARY OF STATE ALLAMASSEE FOR LORIDA
ARTICLE V II	ofstock is: Shares: 500 @ \$ <u>NITIAL OFFICERS AND/OR DIREC</u> :Jose A. Conesa, Presi 123 Ocean Shores DR.	CTORS  dent Name and Title:  Address:	
	Crivelsi Urtate.VP & 123 Ocean Shores DR. Miami, FL 33037	SEC Name and Title: Address:	
Name and Title: Address:		Name and Title:Address:	-
The name and Florid Name: Address:	EGISTERED AGENT a street address (P.O. Box NOT acceptate Avel A. GOnzalez 2688 S. W. 137 Avenue Miami, Fl. 33175		
Name: Address:	softhe Incorporator is:  Jose A. Comesa  123 Ocean Shores DR  Key Largo, FL 33037	<u></u>	
	is registered agent to accept service of pointiller with and accept the appointment a		oct in this capacity 09/12/2012
l submit this documen	Required Streature/Registered Account and affirm that the facts state herein	n are true. I am aware that the	Date  state information submitted in a