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TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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-10/08/98--01029--008
*****78.75 *****78.75

SUBJECT: DR. G. WILLIAM DOOLIN, JR., OPTOMETRIST, P.A.
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ $70.00 Filing Fee	☐ $78.75 Filing Fee & Certificate of Status	XXX ☐ $78.75 Filing Fee & Certified Copy	☐ $87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

Return to:

FROM: F. B. Estergren, P.A.
Name (Printed or typed)

P.O. Drawer 2167
Address

Ft. Walton Beach, FL 32549
City, State & Zip

1 850 243 0139
Daytime Telephone number

FILED
98 OCT -8 PM 4:01
SECRETARY OF STATE
TALLAHASSEE FLORIDA

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

OF

DR. G. WILLIAM DOOLIN, JR., OPTOMETRIST, P. A.

FILED
98 OCT -8 PM 4:01
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I - NAME:

The name of this Professional Service Corporation is: DR. G. WILLIAM DOOLIN, JR., OPTOMETRIST, P.A., hereinafter referred to as the "Corporation".

ARTICLE II - DURATION:

The Corporation shall exist perpetually, commencing upon the filing of the Articles of Incorporation with the Department of State.

ARTICLE III - PURPOSE:

The Corporation is organized for the purpose of engaging in the practice of Optometry and for the purpose of transacting any or all other lawful business not inconsistent with the Laws of the State of Florida.

ARTICLE IV - CAPITAL STOCK:

The Corporation is authorized to issue 100,000 shares of One Dollar ($1.00) par value common stock.

ARTICLE V - PRE-EMPTIVE RIGHTS:

Every shareholder, upon the sale for cash of any new stock of the same kind, class or series as that which he or she already holds, shall have the right to purchase his or her pro-rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT:

The principal office and street address of the Corporation is: 135 Loizos Dr., Ft. Walton Beach, FL 32548, and the mailing address is: 135 Loizos Dr., Ft. Walton Beach, FL 32548.

The name of the Registered Agent of the Corporation is: DR. G. WILLIAM DOOLIN, JR. and the street office address of such registered agent and registered office of the Corporation is: 135 Loizos Dr., Ft. Walton Beach, FL 32548.

ARTICLE VII - INITIAL BOARD OF DIRECTORS:

The Corporation shall have one director initially. The number of directors may be either increased or decreased from time to time by the By-Laws but shall never be less than one. The name and address of the initial director of the Corporation is: DR. G. WILLIAM DOOLIN, JR., 135 Loizos Dr., Ft. Walton Beach, FL 32548.

ARTICLE VIII - INCORPORATOR:

The name and address of the person signing these Articles is: DR. G. WILLIAM DOOLIN, JR., 135 Loizos Dr., Ft. Walton Beach, FL 32548.

ARTICLE IX - BY-LAWS:

The power to adopt, alter, amend or repeal the By-Laws shall be vested in the Board of Directors and the shareholders.

ARTICLE X - SECTION 1244 STOCK:

It is the intent of this Charter that the directors may sell the capital stock of the Corporation in accordance with the conditions of Sections 1243-1244, inclusive, of the Internal Revenue Code of 1954 as amended.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Incorporation on this 6th day of October, 1998.

Dr. G. William Doolin, Jr.

Dr. G. William Doolin, Jr.

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is:

DR. G. WILLIAM DOOLIN, JR., OPTOMETRIST, P.A.

2. The name and address of the registered agent and office is:

Dr. G. William Doolin, Jr.

(NAME)

135 Loizos Dr.

(P.O. BOX NOT ACCEPTABLE)

Ft. Walton Beach, FL 32548

(CITY/STATE/ZIP)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION 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.

SIGNATURE Dr. G. William Doolin

Dr. G. William Doolin, Jr.

DATE 6 OCT 98