

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000006889

Entity Name: FLORIDA VISION LASIK, LLC

Current Principal Place of Business:

1515 NORTH FLAGLER DRIVE
STE 510
WEST PALM BEACH, FL 33401

Current Mailing Address:

1050 S.E. MONTEREY ROAD
SUITE 104
STUART, FL 34994 US

FEI Number: 52-2248673

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LIENHARDT, DAVID LEE
1050 SE MONTEREY RD
SUITE 104
STUART, FL 34994 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DAVID LIENHARDT

03/23/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name DAUBERT, JACK M.D.
Address 1050 S.E. MONTEREY ROAD, STE 104
City-State-Zip: STUART FL 34994

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JACK DAUBERT

MANAGER

03/23/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date