2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 08, 2019
Secretary of State
9586522960CC

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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:

2727 N HARWOOD ST
STE 350
DALLAS, TX 75201 US

FEI Number: 52-2248673

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
SUITE 104
PLANTATION, FL 33324 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: JACK S. DAUBERT MD 03/08/2019

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR	Title	PRESIDENT
Name	DAUBERT, JACK S. DR.	Name	NEAL, GEORGE
Address	1050 S.E. MONTEREY ROAD, STE 104	Address	2727 N HARWOOD ST STE 350
City-State-Zip:	STUART FL 34994	City-State-Zip:	DALLAS TX 75201
Title	TREASURER	Title	SECRETARY
Name	CHO, AARON	Name	FOGLIA, MATTHEW
Address	2727 N HARWOOD ST STE 350	Address	2727 N HARWOOD ST STE 350
City-State-Zip:	DALLAS TX 75201	City-State-Zip:	DALLAS TX 75201

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: MATTHEW FOGLIA SECRETARY 03/08/2019

Electronic Signature of Signing Authorized Person(s) Detail — Date