2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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Secretary of State
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Entity Name: BROOKS EYE CARE, LLC

Current Principal Place of Business:

8890 SALROSE LANE, UNIT 203
FORT MYERS, FL 33912

Current Mailing Address:

8890 SALROSE LANE, UNIT 203
FORT MYERS, FL 33912 US

FEI Number: 46-3882783

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JORDAN T. BROOKS, O.D.
8890 SALROSE LANE, UNIT 203
FORT MYERS, FL 33912 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:

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	JORDAN T. BROOKS, O.D.	Name	JENIFER L. BROOKS
Address	8890 SALROSE LANE, UNIT 203	Address	8890 SALROSE LANE, UNIT 203
City-State-Zip:	FORT MYERS FL 33912	City-State-Zip:	FORT MYERS FL 33912

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: JORDAN BROOKS, O.D. MANAGER 03/09/2015

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