

To:

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2022-10-28 10:12:53 PDT

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From: Kaity Toon

10/28/22, 1:11 PM

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Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6380

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Account Name : C T CORPORATION SYSTEM

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**MERGER OR SHARE EXCHANGE  
JOHNSON & JOHNSON VISION CARE, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$60.00

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Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Merger  
For  
Florida Limited Liability Company

The following Articles of Merger is submitted to merge the following Florida Limited Liability Company(ies) in accordance with s. 605.1025, Florida Statutes.

**FIRST:** The exact name, form/entity type, and jurisdiction for each merging party are as follows:

<u>Name</u>	<u>Jurisdiction</u>	<u>Form/Entity Type</u>
The Vision Care Institute, LLC	Florida	Limited liability company
LOG-113448		

**SECOND:** The exact name, form/entity type, and jurisdiction of the surviving party are as follows:

<u>Name</u>	<u>Jurisdiction</u>	<u>Form/Entity Type</u>
Johnson & Johnson Vision Care, Inc.	Florida	Corporation

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**THIRD:** The merger was approved by each domestic merging entity that is a limited liability company in accordance with ss. 605.1021-605.1026; by each other merging entity in accordance with the laws of its jurisdiction; and by each member of such limited liability company who as a result of the merger will have interest holder liability under s. 605.1023(1)(b).

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FILED

**FOURTH:** Please check one of the boxes that apply to surviving entity: (if applicable)

- ☒ This entity exists before the merger and is a domestic filing entity, the amendment, if any to its public organic record are attached.
- ☐ This entity is created by the merger and is a domestic filing entity, the public organic record is attached.
- ☐ This entity is created by the merger and is a domestic limited liability limited partnership or a domestic limited liability partnership, its statement of qualification is attached.
- ☐ This entity is a foreign entity that does not have a certificate of authority to transact business in this state, The mailing address to which the department may send any process served pursuant to s. 605.0117 and Chapter 48, Florida Statutes is:

**FIFTH:** This entity agrees to pay any members with appraisal rights the amount, to which members are entitled under ss.605.1006 and 605.1061-605.1072, F.S.

**SIXTH:** If other than the date of filing, the delayed effective date of the merger, which cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State:  
October 31, 2022

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**SEVENTH:** Signature(s) for Each Party:

Name of Entity/Organization:	Signature(s):	Typed or Printed Name of Individual:
The Vision Care Institute, LLC	<i>Pinto Adhola</i>	Pinto Adhola
Johnson & Johnson Vision Care, Inc.	<i>Pinto Adhola</i>	Pinto Adhola

- Corporations:
- General partnerships:
- Florida Limited Partnerships:
- Non-Florida Limited Partnerships:
- Limited Liability Companies:
- Chairman, Vice Chairman, President or Officer  
(If no directors selected, signature of incorporator.)
- Signature of a general partner or authorized person
- Signatures of all general partners
- Signature of a general partner
- Signature of an authorized person

<b>Fees:</b>	For each Limited Liability Company:	\$25.00	For each Corporation:	\$35.00
	For each Limited Partnership:	\$52.50	For each General Partnership:	\$25.00
	For each Other Business Entity:	\$25.00	<u>Certified Copy (optional):</u>	\$30.00