

FL9600000994

(Requestor's Name)

(Address)

(Address)

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(Business Entity Name)

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Certified Copies _____ Certificates of Status _____

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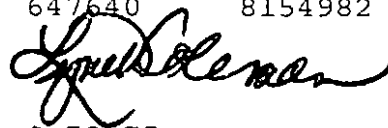
FEB 28 2019
S. PRATHER

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 647640 8154982

AUTHORIZATION :



COST LIMIT : \$ 78.75

ORDER DATE : February 27, 2019

ORDER TIME : 11:06 AM

ORDER NO. : 647640-045

CUSTOMER NO: 8154982

FOREIGN FILINGS

NAME: HEALTHY EYES ADVANTAGE, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Healthy Eyes Advantage, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

John Martin

Name of Person

Healthy Eyes Advantage, Inc.

Firm/Company

6111 Broken Sound Parkway NW, Suite 370

Address

Boca Raton, Florida 33487

City/State and Zip code

jmartin@hea2020.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John Martin

561

693- 4257

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☒ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Healthy Eyes Advantage, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Delaware 3. 82-2524533
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. August 17, 2017 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 6111 Broken Sound Parkway NW, Suite 370, Boca Raton, Florida 33487
(Principal office address)
- _____
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: Corporation Service Company
- Office Address: 1201 Hays Street
- Tallahassee, Florida 32301
(City) (Zip code)

Registered agent's acceptance:

*Having been named as registered agent and to accept service of process for the above stated corporation at the place
designated in this application, 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 relative to the proper and complete performance of my
duties, and I am familiar with and accept the obligations of my position as registered agent.*

Corporation Service Company

By: Roxanne Turner

Roxanne Turner
Asst. Vice President

(Registered agent's signature)

Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to
Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction
of the law of which it is incorporated.

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11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Executive Chairman/Director - Jim McGrann

Address: 6111 Broken Sound Parkway NW, Suite 370, Boca Raton, Florida 33487

Vice Chairman:

Address:

Director: Christopher Corey

Address: c/o Nautic Partners, 50 Kennedy Plaza, 12th Floor, Providence, Rhode Island 02903

Director: Keith Farrow

Address: c/o Nautic Partners, 50 Kennedy Plaza, 12th Floor, Providence, Rhode Island 02903

B. OFFICERS

President: and CEO: Jim McGrann

Address: 6111 Broken Sound Parkway NW, Suite 370, Boca Raton, Florida 33487

Vice President:

Address:

Secretary: Andrew Alcorn

Address: 6111 Broken Sound Parkway NW, Suite 370, Florida 33487

Treasurer: and Chief Financial Officer: John Martin

Address: 6111 Broken Sound Parkway NW, Suite 370, Boca Raton, Florida 33487

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.



Signature of Director or Officer

officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

John Martin, Treasurer & Chief Financial Officer

(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FL

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HEALTHY EYES ADVANTAGE, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF FEBRUARY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HEALTHY EYES ADVANTAGE, INC." WAS INCORPORATED ON THE SEVENTEENTH DAY OF AUGUST, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



A handwritten signature in black ink, reading "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

6491517 8300

SR# 20191495160

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202337347

Date: 02-27-19