

1201 HAYS STREET  
TALLAHASSEE, FL 32301

800-342-8086

# F95000005244

**SC networks**  
PRESTICE HALL  
LEGAL & FINANCIAL SERVICES

ACCOUNT NO. : 072100000032

REFERENCE : 717251 140764A

AUTHORIZATION : *Patricia P. Pitt*

COST LIMIT : \$ 1278.75

W95-21332

ORDER DATE : October 25, 1995

ORDER TIME : 3:41 PM

ORDER NO. : 717251

CUSTOMER NO: 140764A

CUSTOMER: Linda Bittner, Legal Asst  
American Ophthalmic, Inc.  
Suite 600  
250 South Park Avenue  
Winter Park, FL 32789

800001620508

FOREIGN FILINGS

NAME: AMERICAN OPHTHALMIC OF DOTHAN,  
INC.

XX PROFIT  
NON-PROFIT

CORPORATE  
LIMITED PARTNERSHIP

XX QUALIFICATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY  
XX PLAIN STAMPED COPY  
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Karen B. Rozar

RECEIVED  
95 OCT 26 PM 3:07  
FILED  
95 OCT 26 PM 3:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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. AMERICAN OPHTHALMIC OF DOTHAN , INC.

(Name of corporation: the word "INCORPORATED," "COMPANY," or "CORPORATION" or words or abbreviations of like import in language, as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. ALABAMA

(State or country under the law of which it is incorporated)

3. June 22, 1994

(Date of Incorporation)

4.

Perpetual

(Duration)

5. 63-1122214

(Federal Employer Identification number, if applicable)

6. June 1994

(Date first transacted business in Florida. See sections 607.1501, 607.1502, and 817.155, F.S.)

7. 250 South Park Ave., Suite 600, Winter Park, FL 32789

(Current mailing address)

8. Eye Care Services

(Corporate purpose and nature of business in which it is engaged in Florida)

9. Names and addresses of officers and or directors:

**A. Directors:**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Thomas R. Whatley, Jr.

Address: \_\_\_\_\_

250 South Park Ave., Suite 600, Winter Park, FL 32789

Director: \_\_\_\_\_

Mitchell G. Billing

Address: \_\_\_\_\_

250 South Park Ave., Suite 600, Winter Park, FL 32789

FILED  
95 OCT 26 PM 3:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**9. Officers:**

**President:** Michael Grubbe

**Address:** 250 South Park Ave., Suite 600, Winter Park FL 32789

**Vice President:** Mitchell G. Billing

**Address:** 250 South Park Ave., Suite 600, Winter Park, FL 32789

**Vice President:** J. Bailey Magruder

**Secretary:** 250 South Park Ave., Suite 600, Winter Park, FL 32789  
Thomas R. Whatley, Jr.

**Address:** 250 South Park Ave, Suite 600, Winter Park, FL 32789

**Treasurer:** Connie Fraley

**Address:** 250 South Park Ave., Suite 600, Winter Park, FL 32789

(If needed, you may attach an addendum to the application listing additional officers and/or directors.)

**10. Name and Street address of Florida registered agent:**

**Name:** CORPORATION SERVICE CORPORATION  
**Office Address:** 1201 Hays Street  
Tallahassee, Florida 32301

FILED  
5 OCT 26 PM 3:38  
TALLAHASSEE, FLORIDA  
Zip Code

**11. 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.

Registered agent's signature: Karen B. Roger

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

**13.** Michael E. Grubbe  
(Signature of Chairman, Vice Chairman, or any officer listed in number 9 of the application)

**14.** MICHAEL GRUBBE PRESIDENT  
(Name and capacity of person signing application)

# STATE OF ALABAMA

I, Jim Bennett, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that the domestic corporation records on file in this office disclose that American Ophthalmic of Dothan, Inc. incorporated in Montgomery County, Montgomery, Alabama on June 22, 1994. I further certify that the records do not disclose that said American Ophthalmic of Dothan, Inc. has been dissolved.

FILED  
95 OCT 26 PM 3:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

October 23, 1995

Date

*Jim Bennett*

Jim Bennett

Secretary of State

★  
**CAPITOL CORPORATE SERVICES, INC.**

**F95000005244**

December 26, 1996

**FLORIDA SECRETARY OF STATE  
P. O. Box 6327  
Tallahassee, FL 32314**

**Attn: Corporate Filing Dept.**

**Re: AMERICAN OPHTHALMIC OF DOTHAN, INC.**

**100002043961--7  
-01/03/97--01026--003  
\*\*\*\*\*35.00 \*\*\*\*\*35.00**

**Dear Filing Clerk:**

Enclosed please find a Statement of Change of Registered Office/Agent, for the above referenced name, which is to be filed in your office. I have enclosed check # 0990 in the amount of \$ 35.00 for the filing fee. After filing please return to me the file-stamped copy in the enclosed self-addressed envelope. If you have any questions please contact me at 800-472-0544.

**Thank you,**

*Delanie Lundgren*

**Delanie Lundgren**

**enclosures**

**FILED  
97 JAN -2 AM 11:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

*JH 1/3  
RA Ch*

Florida Department of State, Jim Smith, Secretary of State

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Alabama submits the following statement in order to change its registered office or registered agent, or both, in the State Florida.

1a. The name of the corporation is: AMERICAN OPTHELMIC OF DOTHAN, INC.

1b. Date of incorporation: 10/26/95 Document number P93000005244

2. The name and address of the current registered agent and office:  
Corporation Service Company

1201 Nays Street, Tallahassee, FL 32301-2525

3. The name and address of the new registered agent and office:  
(P.O. Box Not Acceptable)

NRAI Services, Inc.

526 East Park Avenue, Tallahassee, Florida 32301

The street address of its registered agent and the street address of the business office of its registered agent as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

Richard J. D'Amico  
SIGNATURE

Richard J. D'Amico, Vice President  
Typed or printed name and title

December 17, 1996  
DATE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 OBLIGATION OF MY POSITION AS REGISTERED AGENT.

NRAI Services, Inc.

SIGNATURE By: Alan Lundgren, asst. sec.  
(Registered Agent)

DATE 12-26-96