

SUBJECT: INTERNATIONAL SOCIETY OF REFRACTIVE SURGERY	
(Name of Corporation) TALLAHASSE AUG 26 Dear Sir or Madam:	
The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Goodugg its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conducts its affairs in Florida.	ij k
Please return all correspondence concerning this matter to the following: 1 100 10 1 -03/27/96-0 +#+++73.75	1021027
JERRY W. POFFENBERGER (Name of Person)	
(Name of Porton)	
INTERNATIONAL SOCIETY OF REFRACTIVE SURGERY (Firm/Company)	
1175 SPRING CENTRE SOUTH BLVD., SUITE 152	
ALTAMONTE SPRINGS, FL 32714	
(City, State and Zip Code)	
For further information concerning this matter, please call:	
JERRY W. POFFENBERGER at (407) 786 - 7446 (Name of Person) Area Code & Daytime Telephone Number	
COURIER ADDRESS: MAILING ADDRESS:	

Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

(State or o	DELAWARE	w of which	3	72-090-7717 (FEI number, if applica	ble)
t is incorp	orated)		_	TOTAL TOTALLA T	
	corporation)		5. (Duratio	PERPETUAL n: Year corp. will cease	to exist or
AUGU	ST 15, 1996	3	P. Pro-	 ,	
(Dat	e cornecation limit o	conducted Affairs in Flo 617.1502, and 817.155	rida - . F.S.)		ლ I
		RING CENTRE SO		, SUITE 152	95 AU Secre
	ALTAMONT	PE SPRINGS, F			G 26
and phys wpose(s)	dissemina icians who	tion of knowle wish to lear cover in home see or	ege about	reiractive s	distry among
		ss of Florida regis		Liber our Er rije arme or L	
	nd street addre	ss of Florida regis	tered agent:	THEIG OUR ER UNE MARKE OR F	
	JERRY V	y. POFFENBERGI	tered agent: ER Name)		

deliv offici inco	iched is a certificate of existence duly authenticated, not more than 90 overy of this application to the Department of State, by the Secretary of cial having custody of corporate records in the jurisdiction under the law proprieted.	w of whi	ch it i	3
NOT	nes and addresses of officers and/or directors: (Street address only ceptable) ECTORS (Street address only- P. O. Box NOT acceptable)	y- P. O.	Box	
Chairma	m: Theodore P. Werblin, M.D., PhD			
Address	1051 Staffird Drive			
	Princeton, WV 24740			
Vice Ch	wirman: Jeffrey B. Robin, M.D.			
Address	:3755 Orange Place	gri		
71001000	Beachwood, OH WH122	SEC	¥ 55	
Director	Jerry W. Poffenberger	至	AUG 2	
	: 506 Sabal Trail Circle	SSE	25	
Address	Longwood, FL 32779	11.00 11.00	H	
551	r:	FLOR	8: 57	-
		DE DE	-1	
Address	s;			
	ICERS (Street address only- P. O. Box NOT acceptable)			
	R: Executive Director Jerry W. Poffenberger			
Address	:1175 Spring Centre South Blvd., Suite 152			
	Altamonte Springs, FL 32714			
Vice Pr	esident:			
Addres	s:			
Secreta	ry: Stephen S. Lane, M.D.			
	s: 232 N. Main Street, Stillwater, MN 55802			
	cr: Stephen G. Slade. M.D.			
Addres	s: 3900 Essex Lane, Suite 101, Houston, TX 7702	7		
NOTE:	If necessary, you may attach an addendum to the application listing a	dditional	offic	ers

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

Jerry W. Poffenberger, Executive Director
(Typed or printed name and capacity of person signing application)

and/or directors.

State of Delaware Office of the Secretary of State

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INTERNATIONAL SOCIETY OF REFRACTIVE SURGERY" 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 NINETEENTH DAY OF AUGUST, A.D. 1996.

SECRETARY F STATE

Ldward J. Freel, Secretary of State

AUTHENTICATION

DATE

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08-19-96

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