Electronic Articles of Organization
For
Florida Limited Liability Company

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FILED 8:00 AM
October 24, 2002
Sec. Of State

Article I

The name of the Limited Liability Company is:

DR. COLIN C. MCDOWELL OPTOMETRIST, LLC

Article II

The street address of the principal office of the Limited Liability Company is:

11286 CLEVELAND AVENUE
FORT MYERS, FL. 33907

The mailing address of the Limited Liability Company is:

8439 MALLARDS WAY
NAPLES, FL. 34114

Article III

The name and Florida street address of the registered agent is:

COLIN C MCDOWELL
8439 MALLARDS WAY
NAPLES, FL. 34114

Having been named as registered agent and to accept service of process for the above stated limited liability company 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 relating 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 Signature: COLIN C. MCDOWELL

Signature of member or an authorized representative of a member

Signature: COLIN C. MCDOWELL