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**LIMITED LIABILITY COMPANY**

The Lasik Vision Institute 300, LLC

Certificate of Status	0
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**ARTICLES OF ORGANIZATION  
OF  
THE LASIK VISION INSTITUTE 300, LLC**

The undersigned does hereby subscribe to and file these Articles of Organization for the purpose of organizing a limited liability company under the Florida Limited Liability Company Act.

**ARTICLE I  
NAME**

The name of this limited liability company is:

**THE LASIK VISION INSTITUTE 300, LLC**

**ARTICLE II  
PRINCIPAL OFFICE/MAILING ADDRESS**

The principal office and mailing address of this limited liability company is:

3801 S. Congress Avenue  
Lake Worth, FL 33461

**ARTICLE III  
REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED  
AGENT'S SIGNATURE**

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

Matthew Zifrony, Esq.  
c/o Tripp Scott, P.A.  
110 SE 6<sup>th</sup> Street, 15<sup>th</sup> Floor  
Ft. Lauderdale, FL 33301

Prepared By: Matthew Zifrony, Esq.  
FL Bar No. 0885487  
Tripp Scott, PA  
110 SE 6 Street, 15 Floor  
Ft. Lauderdale, FL 33301  
(954) 525-7500

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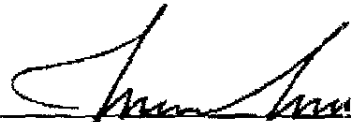
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Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. 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 as provided for in Chapter 608, F.S.

  
Matthew Zifrony  
Registered Agent

#### ARTICLE IV MANAGEMENT

The limited liability company is to be managed by its member(s) and is, therefore, a member-managed company.

  
Marco Musa  
Authorized Representative of the Member(s)

(In accordance with Section 608.408(1), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.)

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