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EXAMINER



CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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WILLIAM SEE TOMOR

ARTICLES OF ORGANIZATION FOR FOR VISION SOURCE OF EAST BROWARD, LLC.

The undersigned, for the purpose of forming a company under the Florida Limited Liability Act, hereby adopts the following Articles of Organization.

ARTICLE I: NAME

The name of the company is VISION SOURCE OF EAST BROWARD, LLC.

ARTICLE II: PRINCIPAL OFFICE

The principal office and mailing address of the company is 2161 East Commercial Blvd., Fort Lauderdale, Florida 33308.

ARTICLE III: MANAGEMENT

The company will be a manager managed Limited Liability Company.

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Thomas M. Dachelet, Esq., 888 SE 3rd Avenue, Suite 400, Fort Lauderdale, Florida 33316.

ARTICLE V: MANAGERS

The name and address of the initial Manager of the company is:

Jon S. Jacobs, O.D., Manager, 9601 Sea Turtle Drive, Plantation, Florida 33324

The undersigned has executed these Articles of Organization this 4th day of February 2008.

"Your Capital Connection, Inc. by, Weimar Lopez, Client Representative"

Authorized Representative

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 608.415, Florida Statutes, the mentioned company, organized under the laws of the State of Florida, submits the following statement in designating the registered agent/registered office, in the State of Florida.

1.	The	name of the	e company is:	VISION	SOURCE · OF	EAST	BROWARD,	LLC.	
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2.	The	name and a	ddress of the	registered a	gent and offic	e is:			
	:	Thoma	as M. Daci	relet, E	sq.				
	, in	888 5	SE 3rd Ave	enue, Su	ite 400				
		Fort	Lauderda:	Le, Flor	i.da 33316	5			
	.[

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED 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.

THOMAS M. DACHELET, ESQ. Resident Agent