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(City/State/Zip/Phone #)

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2009 MAY 13 AM 10:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. THOMAS

MAY 14 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Avalon Park Eye Care, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Chris Wilson

Name of Person

Marchena & Graham, P.A.

Firm/Company

976 Lake Baldwin Lane, Suite 101

Address

Orlando, Florida 32814

City/State and Zip Code

ken@tesinsky.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ken Tesinsky

Name of Person

at (407)

221-7712

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

CR2E062 (08/05)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

To Whom It May Concern,

This letter is to inform you of an incorrect address listed on the Articles of Incorporation. The landlord provided us with the wrong address to our new business. The error was brought to our attention on May 4, 2009 by their marketing supervisor. The full, correct address is:

Avalon Park Eye Care
12001 Avalon Lake Dr. Suite J
Orlando, Fl. 32828

Thank you,

Ken Tesinsky

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF CORRECTION

**FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted **within the required 30 business days** to correct the **attached** articles of organization or application to transact business in Florida.

FIRST: The name of the limited liability company is:
Avalon Park Eye Care, LLC

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)



Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

The incorrect statement is the address. Instead of reading

12000 Avalon Lake: Dr. Suite J, it should read:

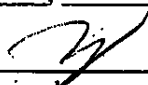
12001 Avalon Lake: Dr. Suite J

OR



Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: May 11, 2009


Signature of a member or authorized representative of a member

Kenneth Tesinsky

Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

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TALLAHASSEE, FLORIDA
STATE SECRETARY OF STATE

**ARTICLES OF ORGANIZATION OF
AVALON PARK EYE CARE, LLC**

**ARTICLE I
NAME**

The name of the limited liability company ("Company") is AVALON PARK EYE CARE, LLC

**ARTICLE II
ADDRESS**

The mailing address and street address of the company's principal office is 12000 Avalon Lakes Drive, Suite J, Orlando, Florida 32828

**ARTICLE III
DURATION**

The period of duration for the company is for so long as operations continue and dissolution.

**ARTICLE IV
REGISTERED AGENT AND OFFICE**

The name of the company's initial registered agent in Florida is Christopher J. Wilson, Esq. Marchena and Graham, P.A., 976 Lake Baldwin Lane, Suite 101, Orlando, Florida 32814

**ARTICLE V
MANAGEMENT**

The company is to be managed by the manager and the name and address of the said manager is as follows:

Kenneth J. Tesinsky, 12000 Avalon Lakes Drive, Suite J, Orlando, Florida 32828

**ARTICLE VI
ADMISSION OF NEW MEMBERS**

The initial member(s) of the company are as follows:

Kenneth J. Tesinsky, 12000 Avalon Lakes Drive, Suite J, Orlando, Florida 32828

Cecilia Wong Tesinsky, 12000 Avalon Lakes Drive, Suite J, Orlando, Florida 32828

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Additional members may be admitted only on the unanimous written consent of the remaining members, and the remaining members shall determine the amount and the nature of contributions by new members.


**ARTICLE VII
TERMINATION OF MEMBERSHIP**

The remaining members of the company shall have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the company; only upon a unanimous vote of the remaining members.

**ARTICLE VIII
AMENDING REGULATIONS**

The power to adopt, alter, amend or repeal the regulations of the company is vested entirely in the members.

IN WITNESS WHEREOF, I have executed these Articles of Organization on this 23 day of March, 2009 at the offices of Marchena and Graham, P.A., 976 lake Baldwin Lane, Orlando, Florida 32814.


Kenneth J. Tesinsky

in (handwritten) form, not in this, to (handwritten) of organization. It does

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CLERK OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 608.415 or 608.507, Fla. Statutes, the undersigned limited liability company submits the following statement designating the registered agent/registered office in the state of Florida.

1. The name of the limited liability company is AVALON PARK EYE CARE, LLC.
2. The name and address of the registered agent and office is: Christopher J. Wilson Esq., Marchena and Graham, PA, 976 Lake Baldwin Lane, Suite 101, Orlando, Florida 32814.
3. 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 and statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Dated this 23 day of March, 2009


Christopher J. Wilson

STATE OF FLORIDA

COUNTY OF ORANGE

The foregoing instrument was sworn to and subscribed before me this 23rd day of March, 2009, by CHRISTOPHER J. WILSON, who is personally known to me or who has presented as a identification.



MELISSA L. MORENO
Commission #DD631915
My Commission Expires
January 22, 2011


Notary Public
My Commission Expires: 1/22/11