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ENTITY NAME:

LOUISVILLE VISION, LLC

CK# 3889

AMOUNT \$155.00

PLEASE FILE THE ATTACHED ARTICLES & RETURN THE FOLLOWING:

XXX CERTIFIED COPY

___ STAMPED COPY

___ CERTIFICATE OF STATUS

O9 APR 17 PH 2: 35
IALLAHASSEE, FLORIDA
Examiner's Initials

ARTICLES OF ORGANIZATION **OF** LOUISVILLE VISION, LLC

The undersigned organizer, desiring to form a limited liability company under the Florida Limited Liability Company Act, hereby states the following:

- 1. The name of the limited liability company is Louisville Vision, LLC.
- .imited The mailing address and street address of the initial principal office of the limited? 2. liability company is:

215 Fifth Street, Suite 100 West Palm Beach, Florida 33401

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

> NRAI Services, Inc. 2731 Executive Park Drive, Suite 4 Weston, Florida 33331

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated herein, I hereby accept the appointment as registered agent and agree to act in that 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, Florida Statutes.

NRAI SERVICES, INC.

Title: Special Asst. Secretary

Eileen Chaddock

IN WITNESS WHEREOF, the undersigned has duly executed these Articles of Organization this 17th day of April, 2009.

ROSS D. COHEN, Organizer

This Instrument was prepared by:

Ross D. Cohen, Esq.

Greenebaum Doll & McDonald PLLC

3500 National City Tower

101 South Fifth Street

Louisville, Kentucky 40202-3197

502/587-3579

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