

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000086635

Entity Name: ORION EYE CARE, LLC

FILED
Apr 26, 2011
Secretary of State

Current Principal Place of Business:

8040 MEDITERRANEAN DR
ESTERO, FL 33928

New Principal Place of Business:

Current Mailing Address:

8040 MEDITERRANEAN DR
ESTERO, FL 33928

New Mailing Address:

FEI Number: 27-0894916

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SARIVANNARA, BOB
4917 BERRYMAN STREET
LEHIGH ACRES, FL 33971 US

Name and Address of New Registered Agent:

SARIVANNARA, BOBBY
15280 SONOMA DRIVE APT 206
FORT MYERS, FL 33908 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: BOBBY SARIVANNARA

04/26/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: SARIVANNARA, BOBBY
Address: 15280 SONOMA DRIVE #206
City-St-Zip: FORT MYERS, FL 33908 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BOBBY SARIVANNARA

MGR

04/26/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date