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EXAMINER

COVER LETTER

CR2E062 (08/05)

| | Registration Section Division of Corporations | |
|--------------------------|--|--|
| SUBJEC | T: Eye Sight Solutions, LLC | |
| | Name of Limited Liability Company | |
| Dear Sir o | or Madam: | |
| The enclo | sed Articles of Correction and fee(s) are submitted for filing. | |
| Please ret | urn all correspondence concerning this matter to the following: | |
| | Karen A. Valdez | |
| | Name of Person | |
| | Firm/Company | |
| | 11373 Cortez Blvd, Ste 400 | 12 T |
| | Address | EB-I MIL |
| | Brooksville, Florida 34613 | SEE - |
| | City/State and Zip Code | |
| | evesightsolutions@vahoo.com | FEB-I MII: 30 SECTARY OF STATE LAHASSEE, FLORID |
| E-m | eyesightsolutions@yahoo.com ail address: (to be used for future annual report notification) | A A A |
| For furthe | or information concerning this matter, please call: | |
| | Karen A Valdez at (352) 584-0 | |
| | Name of Person Area Code & Daytime Telephone | Number |
| Registration | /COURIER ADDRESS: MAILING ADDRESS on Section Registration Section | |
| Division o Clifton Bu | of Corporations Division of Corporation P.O. Box 6327 | ons |
| 2661 Exec | cutive Center Circle Fallahassee, Florida 3 Pee, Florida 32301 | 2314 |
| Enclosed | is a check for the following amount: | |
| \$25 Fil: | ing Fee \$\bigcup \$30 \text{ Filing Fee & Dertificate of Status} \bigcup \$55 \text{ Filing Fee & Dertificate of Status} \bigcup \$55 \text{ Filing Fee & Certificate of Status} \bigcup \$100 \text{ Certificate of Status} \bigcup \$100 Cer | itus & |

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

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

| FIRST | The name of the limited liability company is: Eye Sight Solutions, LLC | | | | |
|----------|--|------------|-----------|--|--|
| SECO | ND: The articles of organization or the application to transact business | • | • | | |
| (CF | IECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE ST | ATEMENT | | | |
| √ | Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: Please remove Daniel R. Valdez from the Articles of Organization where he is | | | | |
| | listed as a MGRM. Karen Valdez is the only "MGRM" of Eye Sight | Solutions, | _ | | |
| | LLC. per my accountant for tax reasons. Karen Valdez is the sole ov | wner and | | | |
| | managing member of this Company. | | _ | | |
| | <u>OR</u> | | | | |
| | Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: | | | | |
| | | 12 F | - - | | |
| | | HASSE L | ~~ ~== | | |
| Dated: | January 31 , 2012 . | Y BE STATI | ED | | |
| | Signature of a member or authorized representative of a member | Am 6 | | | |
| | Karen A. Valdez | | | | |
| | Typed or printed name of signee | | | | |
| • | Filing Fee: \$25.00 Certified Copy: \$30.00 (optional) | | | | |

Electronic Articles of Organization For Florida Limited Liability Company

L12000013372 FILED 8:00 AM January 27, 2012 Sec. Of State ncausseaux

Article I

The name of the Limited Liability Company is: EYE SIGHT SOLUTIONS, LLC

Article II

The street address of the principal office of the Limited Liability Company is:

11373 CORTEZ BLVD STE 400 BROOKSVILLE, FL. 34613

The mailing address of the Limited Liability Company is:

11373 CORTEZ BLVD STE 400 BROOKSVILLE, FL. 34613

Article III

The purpose for which this Limited Liability Company is organized is:
TO SELL LOW VISION MAGNIFIERS AND GLASSES

Article IV

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

KAREN A VALDEZ 11373 CORTEZ BLVD STE 400 BROOKSVILLE, FL. 34613

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.

Registered Agent Signature: KAREN A VALDEZ

Article V

The name and address of managing members/managers are:

Title: MGRM KAREN A VALDEZ 11373 CORTEZ BLVD, STE 400 BROOKSVILLE, FL. 34613

Title: MGRM DANIEL R VALDEZ 6772 CR 665 BUSHNELL, FL. 33513 L12000013372 FILED 8:00 AM January 27, 2012 Sec. Of State ncausseaux

Article VI

The effective date for this Limited Liability Company shall be:

02/01/2012

Signature of member or an authorized representative of a member

Electronic Signature: KAREN A VALDEZ

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.