

L16 0000 82589

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900287350009

06/29/16--01009--018 **55.00

2016 JUN 29 PM 12:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 JUN 30
J. HARRIS

LAW OFFICES
LITTNER, DESCHLER & LITTNER

512 NORTH NEW STREET

P.O. BOX 1407

BETHLEHEM, PENNSYLVANIA 18016

www.littndeschlaw.com

ROBERT H. LITTNER†
MICHAEL C. DESCHLER
ROBERT V. LITTNER* • †
MATTHEW J. DESCHLER

*ALSO MEMBER FLORIDA BAR
•LL.M. IN ESTATE PLANNING
† ACCREDITED ESTATE PLANNER®

TELEPHONE (610) 865-6770

TELE-FAX (610) 865-6433

E-MAIL

rhittner@littndeschlaw.com
mdeschler@littndeschlaw.com
rvlittner@littndeschlaw.com
mjdeschler@littndeschlaw.com

June 27, 2016

Registration Section
Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

Re: Kai Vision LLC

Dear Sir/Madam:

Enclosed are the following regarding the above-captioned matter:

1. Cover Letter;
2. Articles of Amendment to Articles of Organization of Kai Vision LLC, in duplicate;
and
3. A check in the amount of \$55.00 to cover the fees.

Please acknowledge receipt of this filing by stamping the duplicate copies and returning them to me in the enclosed self-addressed stamped envelope.

Very truly yours,

LITTNER, DESCHLER & LITTNER



Robert V. Littner

RVL/ank
Enclosures

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Kai Vision LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Robert V. Littner, Esquire

Name of Person

Littner, Deschler & Littner

Firm/Company

512 North New Street

Address

Bethlehem, PA 18018

City/State and Zip Code

rvlittner@littndeschlaw.com

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

For further information concerning this matter, please call:

Robert V. Littner

610 865-6770

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☒ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Kai Vision LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on April 27, 2016 and assigned
Florida document number L16000082589.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: Debra Fernald

New Registered Office Address: 2106 N.W. 14th Terrace

Enter Florida street address

Homestead, **Florida** 33030

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 relative 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 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.


If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Justin Gauba	5226 Dartmouth Drive	<input type="checkbox"/> Add
		Macungie, PA 18062	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Phi Nguyen	4592 Lisa Lane	<input checked="" type="checkbox"/> Add
		Allentown, PA 18103	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Article IV

A. The limited liability company shall not engage in any business activity other than that which is directly related to the operation of a Pearle Vision retail optical or such other business operation as shall be approved in writing by Pearle Vision.

B. The total number of owners of the limited liability company shall not exceed five (5) individuals.

C. The limited liability company shall neither encumber nor assign nor permit the transfer of any ownership in the limited liability company without Pearle Vision's prior written consent.

D. The transfer of this ownership interest is subject to the terms and conditions of a License Agreement with Luxottica Retail North America Inc., Licensor of Pearle Vision ("Pearle Vision").


E. Effective date, if other than the date of filing: April 27, 2016 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated June 22, 2016


Signature of a member or authorized representative of a member

Phi Nguyen

Typed or printed name of signee

16 JUN 29 PM 12:41
RECEIVED
TALLAHASSEE
FBI