

L20000233769

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

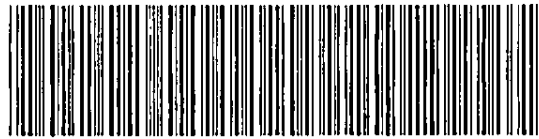
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

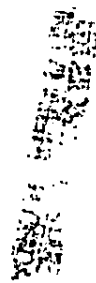
Special Instructions to Filing Officer:

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TALLAHASSEE, FL

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AUG 13 2020

**CORPORATE
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WALK IN

PICK UP: 08/12/2020

- ☐ **CERTIFIED COPY** _____
- xx** **PHOTOCOPY** _____
- ☐ **CUS** _____
- xx** **FILING** LLC _____

1. True Eye Optical
(CORPORATE NAME AND DOCUMENT #)
2. _____
(CORPORATE NAME AND DOCUMENT #)
3. _____
(CORPORATE NAME AND DOCUMENT #)
4. _____
(CORPORATE NAME AND DOCUMENT #)
5. _____
(CORPORATE NAME AND DOCUMENT #)
6. _____
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

FILED

2020 AUG 12 AM 8: 52

SECRETARY OF STATE
TALLAHASSEE, FL

**ARTICLES OF ORGANIZATION
OF
TRUE EYE OPTICAL, LLC**

The undersigned, for the purpose of forming a Limited Liability Company under the Florida Limited Liability Company Act, Florida Statutes Chapter 605, does hereby adopt the following Articles of Organization.

Article 1. - Name

The name of the limited liability company is True Eye Optical, LLC (the "Company").

Article 2. - Commencement & Duration

The Company shall commence upon the filing with the Florida Department of State and shall continue to exist perpetually.

Article 3. - Company Address

The street address of the Company's principal office is 23388 State Road 54, Suite 102, Lutz, Florida 33549, and the mailing address of the Company is the same.

Article 4. - Registered Office & Agent


The name of the Company's initial registered agent in Florida is Kevin Whaley. The address of the Company's registered office in Florida is 23388 State Road 54, Suite 102, Lutz, Florida 33549.

Article 5. - Management

The Company is to be managed by managers and is, therefore, a manager-managed company and the initial managers and their address is:

<u>Title</u>	<u>Name and Address</u>
MGR	Samuel J. Teske 23388 State Road 54, Suite 102, Lutz, Florida 33549
MGR	Kevin Whaley 23388 State Road 54, Suite 102, Lutz, Florida 33549

In accordance with Section 605.0203(1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in Section 817.155, Florida Statutes.



Kevin Whaley
Date: August 11th, 2020


SECRETARY OF STATE
TALLAHASSEE, FL

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Statement Accepting Appointment as Registered Agent

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 as provided in Chapter 605, Florida Statutes.



Kevin Whaley, Registered Agent
Date: August 11th, 2020