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SECRETARY OF STATE ATTAILLAHASSEE, FLORIDA

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COVER.LETTER

Division of Corporations
SUBJECT: EYE DOCTORS OPTICAL OUTLET OF BRADENTON, P.A. Name of Corporation
DOCUMENT NUMBER: L41611
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Robert Bible Jr. Name of Contact Person
LOPEZ, KELLY & BIDE, P.A. Firm/Company
4100 W. KENNEDY BLVD., SuITE 114
TAMPA, FL 33609 City/State and Zip Code
rbible@lkb-pa.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Robert Bible at (813) 289-3400 Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO:

Amendment Section

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida	
in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: EYE DOCTORS OPTICAL OUTLET OF BRANDENTON, P.A.	
2. The principal office address: 5607 Johns Road	
Tampa, Florida 33634	
3. The mailing address (if different):	_
4. Date of incorporation/qualification: Jan. 8, 1990 Document number: L41611	_
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)	
Robert W. Bible, Jr.	
4600 W. Cypress Street, Suite 500	
Tampa, Florida 33607	7
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Lopez, Kelly & Bible, P.A. 4100 W. Kennedy Blvd., Suite 114 P.O. Box NOT acceptable Tampa, Florida 33609	
Lopez, Kelly & Bible, P.A.	TY
4100 W. Kennedy Blvd., Suite 114	
P.O. Box NOT acceptable Tampa, Florida 33609	
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.	
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.	
Robert N. Lewenson, Vice-President Signature of an officer of director Robert N. Lewenson, Vice-President Printed or typed name and title	
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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.	
Signature of Registered Agent 7/14/10 Date	
If signing on behalf of an entity:	
Robert W. Bible. Jr. Vice-President	

* * * FILING FEE: \$35.00 * * *

Typed or Printed Name