

ACCOUNT NO. : 07210000032

REFERENCE

: 710603

4301448

AUTHORIZATION

COST LIMIT

ORDER DATE: May 25, 2000

ORDER TIME : 11:59 PM

ORDER NO. : 710603-025

400003272284--1

CUSTOMER NO: 4301448

CUSTOMER: Ms. Katie Fossey Dorsey & Whitney Llp 220 South Sixth Street

Minneapolis, MN 55402

FOREIGN FILINGS

NAME: LASIK VISION (EAST), LLC

XXXX QUALIFICATION

(TYPE: <u>LL)</u>

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Tamara Odom



APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of foreign	ign limited liability company)
elaware risdiction under the law of which foreign limited liabilit npany is organized)	ity (FEI number, if applicable)
(Date of Organization)	5. Perpetual (Duration: Year limited liability company wife ease exist or "perpetual") (See sections 608.501, 608.502, and 817.155, F.S.)
Spon qualification (Date first transacted business in Florida. ((See sections 608.501, 608.502, and 817.155, F.S.)
1500 West Georgia Street	TO T
Vancouver, British Columbia, Canada V6G 2 (Street add	dress of principal office)
	aged company, check here
The name and usual business addresses of the n	managing members or managers are as follows:
Attached is an original certificate of existence, no more that jurisdiction under the law of which it is organized. (A photoslation of the certificate under oath of the translator must be	managing members or managers are as follows: an 90 days old, duly authenticated by the official having custody of reprocessing the stocopy is not acceptable. If the certificate is in a foreign language, a

Typed or printed name of signee

Forrest G. Burke, Manager

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:	
Lasik Vision (East), LLC	
2. The name and the Florida street address of the registered agent and office are:	OO MAY 3
Corporation Service Company (Name)	SSEE FL
Florida street address (P.O. Box NOT ACCEPTABLE)	: 08
TallahasseeFL 32301	t mar in th

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 for in Chapter 608, F.S..

by: margaret Pike, asst. Vecritary

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

LASIK VISION (EAST), LLC MANAGERS

Michael R. Henderson 1500 West Georgia Street Suite 2000 Vancouver, British Columbia, Canada V6G 2Z6

Jonathon D. Carr, M.D. 1189 Cumberland Road Atlanta, GE 30306

Forrest G. Burke 220 South Sixth Street Pillsbury Center South Minneapolis, MN 55402



State of Delaware

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Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "LASIK VISION (EAST), LLC" IS DULY
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD
STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS
OFFICE SHOW, AS OF THE TWENTY-FIFTH DAY OF MAY, A.D. 2000.

OO MAY 31 PH 3: 08
SECRETARISE FLORIDA

Edward J. Freel, Secretary of State

AUTHENTICATION:

0461503

DATE: 05-25-00

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