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## FOREIGN LIMITED LIABILITY COMPANY

Vision Care Holdings, LLC

Certificate of Status	0
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# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	Vision Care Holdings, LLC	•
_,	(Name of foreign limited liability company)	•
2.	Delaware 3, 20-0317638	_
•	(furisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	•
4_	October 14, 2003 5. Perpanual	_
•-	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpensal")	5 - AON C
6.	November 6, 2003	. =
	(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.135, P.S.)	
7.	3801 S. Congress Ave.	<u> </u>
	Total Wheel Mr. 2246)	£.
	Lake Worth, FL 33461 (Street address of principal office)	
8.	If limited liability company is a manager-managed company, check here	
9.	The name and usual business addresses of the managing members or managers are as follows:	
	Kevin Mohan c/o Vision Care Holdings, LLC, 3801 S. Congress Ave., Lake Worth FL 13461	
	Marco Musa c/o Vision Care Holdings, LLC, 3801 S. Congress Ave., Lake Worth FL 33461	
	Edward Whelan, Jr. e/o Vision Care Holdings, LLC, 3801 S. Congress Ave., Lake Worth FL 33461	
10.	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of rule jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign land translation of the certificate under oath of the translator must be submitted.)	ecords ir guage, a
1.	Nature of business or purposes to be conducted or promoted in Florida: To engage in any lawful set or	
	activity for which limited liability companies may be organized under Section 608 of the Florida Statutes, as amended.	
	! Ceum P Moha	
	Signature of a member or an authorized representative of a member. (In accordance with sertion 608.408(3), F.S., the excession of this document constitutes as affirmation under the penalties of perjuty that the facts stated herein are out.)	
	Kevin Mohan, Manager	
	Typed or printed name of signee	

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# 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.

2.	The name and the Florida street addr	ress of the registered agent and office are:	TALLA!
	c	CT Corporation System	HSSA FACE
		(Name)	H <sub>C</sub>
	c/o C T Corporatio	on System, 1200 South Pine Island Road	F STATE
	Florida street address (P.O. Box NOT ACCEPTABLE)		
	Plantation,	F7 33324	

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: SPECIAL ASSISTANT SECRETARY

(Signature)

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

# Delaware PAGE 1

I, EARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VISION CARE HOLDINGS, 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

AND I DO REFERY FURTHER CERTIFY THAT THE SAID "VISION CARE BOLDINGS, LLC" WAS FORMED ON THE FOURTEENTE DAY OF OCTOBER, A.C. 2003.

OFFICE SHOW, AS OF THE FOURTEENTH DAY OF OCTORER, A.D. 2003.

AND I DO HERENT FURTHER CERTIFY THAT THE ANNUAL TAXES HEVE NOT BEEN ASSESSED TO DATE.



Warriet Smith Hindan

AUTHENTICATION: 2687312

DATE: 10-14-53

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