m10000004480

(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: NA3LUNT
OCT 1 2 2010
EXAMINER

210A00020220

Office Use Only



800184526098

08/20/10--01023--026 **87.50

10/12/10--01045--002 **72.50

SECRE JARY OF STATE



August 23, 2010

ABEER AYOUB 977 MAIN STREET PATERSON, NJ 07503

SUBJECT: OPTICAL ACADEMY, LLC

Ref. Number: W10000039753

We have received your document for OPTICAL ACADEMY, LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

There is a balance due of \$72.50.

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper, that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing/from the same office that provided you with the certified copy.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 210A00020220



October 4, 2010

ABEER AYOUB 977 MAIN STREET PATERSON, NJ 07503

SUBJECT: OPTICAL ACADEMY, LLC

Ref. Number: W10000039753

We have received your document for OPTICAL ACADEMY, LLC. However, the document has not been filed and is being returned for the following:

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 610A00023477

amolens com pr future annual report notification) E-mail address: (to be use For further information concerning this matter, please call:

COVI

R LETTER

Code & Daytime Telephone Number

MAILING ADDRESS:

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

STRE ADDRESS:

Divisin of Corporations Regist tion Section Clifto suilding 2661 cutive Center Circle see, FL 32301 Tallah

Enclosed is a check for the following amount:

\$130.00 Filing Fee & \$125.00 Filing Fee Certificate of Status

155.00 Filing Fee & Certified Copy

\$160.00 Filing Fee, Certificate of Status & Certified Copy

S,q

TO:

SUBJECT:

Registration Section Division c! Corporations

The enclosed "Application by Fereign Limited Liability Com

Existence, and check are submitted to register the above refer

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA;
Ortical At Henry 110
(Name of Poleigh Limited plaining Company; must in spide "Limited Elability Company," L.L.C., 'or "LLC.'')
(If name unavailable, enter alternate name adopted for the purese of transacting business in Florida and attach a copy of the written
(If name unavailable, enter alternate name adopted for the purese of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the cernate name. The alternate name must include "Limited Liability Company." "L.I.C." "LLC.")
2 Now Jewson 27-327 6044
2. New Jersey (Jurisdiction under the law of which foreign limited liability company is organized) 3. 27-327 6044 (FET number, if applicable)
4. S 5 2010 (Date of Organization) 5. Nove (Duration: Year limited liability company will cease to
exist or "perpetual") 6
(Date first transacted business in Corida, if prior to registration.) (See sections 608.501 & 608.502 3, to determine penalty liability)
7. 1433 N. Pine Hills Road 52 8
Pine Hills . PL 32808
(Street Addres of Principal Office)
8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the ranaging members or managers are as follows:
Abeer Ayoub
Sahail Ayoub
10. Attached is an original certificate of existence, no more than 0 days old, duly authenticated by the official having custody of records in
the jurisdiction under the law of which it is organized. (A photopy is not acceptable. If the certificate is in a foreign language, a
translation of the certificate under oath of the translator must be abmitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: Manufacturing
and distributing tyl glanes
The anons
Signature of a-member or a stilliorized representative of a member.
(In accordance with section 608.408(3), F.S., the secution of this document constitutes an affirmation under the
penulties of perjury that the facts stated herein after the fam aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)
Abeer Ayoub
Typed or putted name of signee

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 COME ANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE A 1D REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company 5:		
Optical Alademy, LLC		_
If unavailable, the alternate to be used in the state of Florida is:	E 22	2010
The Optical Academy Lic.	LAH	30
2. The name and the Florida street address of the registered agent and office are:	TARY ASSE	
Abeet Ayoub	0F 90	PH PS
(Name)		20
Florida Street Addres (P.O. Box NOT ACCEPTABLE)		
Pine Hills EL 32808		
City/State/Zip		

Having been named as registered agent and to people service of process for the above stated limited liability company at the place designated in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performants of my duties, and I am familiar with and accept the obligations of my position as registered agent or provided for in Chapter 608. Fiorida Statutes.

Hou And

\$ 100.00

S 25.00

\$ 30.00

\$ 5.00

Filing Fee for Application

Designation of Registered Agent

Certified Copy (optional)

Certificate of Status (optional)

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY SHORT FORM STANDING

OPTICAL ACADEMY LLC

0400363155

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on August 5, 2010.

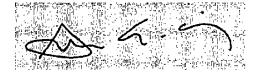
As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Abeer Ayoub 977 Main Street Paterson, NJ 07503



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 7th day of September, 2010



Andrew P Sidamon-Eristoff
State Treasurer

Verify this certificate at https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp