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| Certified Copies Certificates of Status  |  |  |  |
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| Special Instructions to Filing Officer:  |  |  |  |
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## **COVER LETTER**

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Enclosed is an original and one(1) copy of the Articles of Incorporation and a check for:

\$70.00 Filing Fee

\$78.75 Filing Fee &

Certificate of Status

**\$78.75** Filing Fee \$87.50

& Certified Copy

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Frank W. Hays.

Name (Printed or typed)

H220 Lake Forest price #9/2
Address
Bonita Spings F/a. 34/34
City, State & Zip

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION
In Compliance with Chapter 517, F.S., (Not for Profit)

|        | • •   |  |
|--------|---|--|
|        | ARTICLE I NAME  |  |
|        | The name of the corporation shall be: Bonita Spring   | s hons dub eye dinic LNC.  |
|        | /   |  |
|        |   |  |
|        | ARTICLE II PRINCIPAL OFFICE   |  |
|        | The principal place of business and mailing address of this c                                   | orporation shall be:   |
|        | 10312 Pennsylvania, Bonta Spring  | 95 1=1a.34134  |
|        | to the many to deliver of the second  |  |
|        | ARTICLE III PURPOSE   |  |
|        | The purpose for which the corporation is organized is:  | •  |
|        | To omile ove and the  | /  |
|        | To provide eye care to the medically  | indigent   |
|        |   |  |
|        | ARTICLE IV MANNER OF ELECTION   |  |
|        | The manner in which the directors are elected or appointed:                                     | ·  |
|        | appointed by Board of Diretors of SI  | nonsonngagency - the Lions dub   |
|        | 4 Bonda Springs.  |  |
|        | 4 isomic apringation  | ı  |
|        | ARTICLE V INITIAL CIRECTORS AND/OR OF   | ICERS  |
|        | List name(s), address(es) and specific title(s):  | ~ / 7.113/   |
| Ch     | imn. Frank W. Hays. Chairman - 4220 ho  | ike forest. 912 -Bunita Springs 1-19. 34139  |
| Pra    | ea evelyn meyersbarger 1000 (   | Wiggens Pass Rd Naglus Flo 3411  |
|        |   |  |
| 260.11 | Treastred Harbins, Sect/Treusurer 120   | of Wellowstone Drue, Majoro, Ma James  |
|        | ADDICE OF INTERIOR DESIGNATION ACTION AS  | IT OMUBOR ABBORG -:  |
|        | ARTICLE VI INITIAL REGISTERED AGENT AN<br>The name and Florida street address (P.O. Box NOT acc |  |
|        |   |  |
|        | Frankew. Hays- 4220 take Forest onine   | #912 - Bonita Springs Au. 34134  |
|        |   |  |
|        | ARTICLE VII INCORPORATOR  |  |
|        | The name and address of the Incorporator is:  |  |
|        | The name and address of the Incorporator is:  Frank Hays, 4220 Lake Forestioning H              | SA   |
|        | HANK HAYS, 4220 FARE POPESTIONING   | 1912 Bonita Springs, Fdg. 3413.  |
|        |   | 7, 2, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7,   |
|        | ******************  | ***********  |
|        | Having been named as registered agent to accept service of process                              | for the above stated corporation at the place designated   |
|        | in this certificate, I am familiar with and accept the appointment as                           | registered agent and agree to act in this capacity.  |
| ·      | Feelew Houn   | 2/18/07  |
|        | Signature/Registered Agent  | Date   |
|        | 5   | ₩W   |
|        | Loel W. Horn  | 2/18/07  |
|        | Signature/Incorporator  |  |
|        | ψ <sub>j</sub> · · · · · · · · · · · · · · · · · · ·  | Date - Da |