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COVER LETTER

TO: Amendment Division of	at Section Corporations				
SUBJECT:	Florida Foundation Name of C	for Sight, Inc.			
DOCUMENT NU	mber: N090	000002696			
The enclosed States	ment of Change of Registered Office	e/Agent and fee are submitte	d for filing.		
	rrespondence concerning this matter		· ·		
		·			
John E. Griffin					
	Name of Co	ntact Person			
	Carson 8	& Adkins			
Firm/Company					
	2930 Wellington Circle, Suite 201				
Address					
	Tallahassee I	Florida 32309			
Tallahassee, Florida 32309 City/State and Zip Code					
·					
JEGriffin@carson-adkinslaw.com					
E-mail address: (to be used for future annual report notification)					
For further informa	tion concerning this matter, please of	call:			
N	John E. Griffin ne of Contact Person	at (<u>850</u>) Area Code & Daytim	894-1009		
Nan	ne of Contact Person	Area Code & Daytiii	e relephone Number		
Enclosed is a \$35.0	0 check made payable to the Depart	ment of State.			
	Mailing Address: Amendment Section	Street Address: Amendment Sec	tion		
	Division of Corporations	Division of Corp			
	P.O. Box 6327	Clifton Building			
	Tallahassee, FL 32314	2661 Executive			
	-	Tallahassee FL	32301		

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 tatement 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.	_
. The name of the corporation; Florida Foundation for Sight, Inc.	
. The principal office address: 401 Office Plaza Drive	
Tallahassee, Florida 32301	
The mailing address (if different): SAME	
Date of incorporation/qualification: March 17, 2009 Document number: N090000026	96
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)	
Kenneth L. Franklin	
401 Office Plaza Drive	
Tallahassee, Florida 32301	3
Tallahassee, Florida 32301 5. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Leonard A. Carson	
2930 Wellington Circle, Suite 201 P.O. Box NOT acceptable	? -
Tallahassee, Florida 32309	3 0
The street address of its registered office and the street address of the business office of its registered ag is changed will be identical.	gent,
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.	
Signature of an officer or director Emilio Balius, O.D., Director Printed or typed name and title	
hereby accept the appointment as registered agent and agree to act in this capacity. further agree to comply with the provisions of all statutes relative to the proper and complete perform of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, is locument is being filed merely to reflect a change in the registered office address, I hereby confirm that corporation has been notified in writing of this change.	iance f this it the
Signature of Registered Agent Date	
f signing on behalf of an entity:	
Leonard A. Carson Typed or Printed Name	
* * * FILING FEE: \$35.00 * * *	