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TRANSMITTAL LETTER

FILED

OI JAN 10 PM 5:00

SLCRETARY OF STATE
TALLAHASSEE

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

SUBJECT		ANDREW C	IAMBRONE, O.D., PA		
SCDJECI _	(Proposed corporate name-must include suffix)				
	an origi 0.00		the articles of incorporation and \$2.75	a check for: \$ 87.50	
Filing	g Fee	Certificate of Status Of Status ADDITIONAL COPY REQUIRED			
			មប	-01/10/0101083020 +*****78.75 ******78.75	
FROM:	Andrew Ciambrone				
	Name (Printed or typed) 5017 Williamstown Blvd				
			Address		
	Lakeland, FI 33810				
	(863)	Cit 859-0735			
		Daytime	Telephone Number		

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

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ARTICLES OF INCORPORATION OF ANDREW CIAMBRONE, O.D., PA

OI JAN IO PM 5: 00 SECRETARY OF STATE TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

ANDREW CIAMBRONE, O.D., PA

The purpose of this corporation is the practice of Optometry.

ARTICLE II PRINCIPLE OFFICE

The principle place of business and mailing address of this corporation shall be:

5017 WILLIAMSTOWN BLVD LAKELAND, FI 33810

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

10,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Andrew Ciambrone 5017 Williamstown Blvd Lakeland, Fl 33810

•	INCORPORAT	
The name and addresses of the i	ncorporators to these	Articles of
Incorporation are:		
Andrew Ciamborne		
5017 Williamstown Blvd.	•	
Lakeland, Fl 33810		_
The undersigned incorporator(s) h	as (have) executed the	hese Articles of
26th	Decemi	ber
2011		, 2000.

Articles of Incorporation Filing Fee- \$35.00

FILED 01 JAN 10 PM 5:00 SECRETARY OF STATE TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is:

Andrew Ciambrone, O.D., PA

2. The name and address of the registered agent and office is:

Andrew Ciamborne 5017 Williamstown Blvd Lakeland, Fl 33810

HAVING BEEN NAMES AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION 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 MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATUR	E andre	I Cambras	·
DATE /	2-26-Q	ರ <i>ರ</i> ಂ	