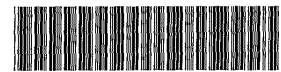
P03000023731

Sharon L. Silver (Requestor's Name)
(Requestor's Name)
Buca Robon Fl. 3343 (Address)
(Address)
Buca Kolm Fl. 3343
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special distructions to Filling Officer.
Office Use Only



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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

SUBJECT: EYE DESIGNS TINC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
Enclosed is an originum \$70.00 Filing Fee	nal and one(1) copy of the articl \$78.75 Filing Fee & Certificate of Status	es of incorporation and a \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	

FROM:

Sharon L. Silver
Name (Printed or typed)

8347 GARDEN GATE PL

BOCA PATON FL. 33433
City, State & Zip

56) 302-3937 Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Ken Detzner Secretary of State

February 19, 2003

SHARON L SILVER 8347 GARDEN GATE PLACE BOCA RATON, FL 33433

SUBJECT: EYE DESIGNS INC. Ref. Number: W03000004832

CALL AS SOON

We have received your document for EYE DESIGNS INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of 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) 245-6904.

Freida Chesser Corporate Specialist New Filings Section

Letter Number: 403A00010939

			0. 基础
A DETECT TO OF THE CONDON A TON			
ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 624	ES (Profit)		(a) (b)
in compilation with chapter out and or chapter was	, 1.5. (110111)		
ARTICLE I NAME			<i>⊘</i> ;
The name of the corporation shall be:	्र ⁻		€
EYE DESIGNED	- 0	PTICIAN	NE P
ARTICLE II PRINCIPAL OFFICE			
The principal place of business/mailing address is:	•		- ' '··
23006 Sandalfo		Drive	
Boca Raton, F	1 33428	en e	
ARTICLE III PURPOSE			
The purpose for which the corporation is organized of prescription eyes loss confects lenses and confection ARTICLE IV SHARES	is: _5011'mg, f	HIM & POPHING	siput coq
of prescription eyequest	25, 2011,00	がき たみれっし	706
SURPOSOS PINOR JOIS	2001(12, 28	wied of	\$0.18
ARTICLE IV SHARES 100505	मं वर्षा क्रिंगक्रें	505.	()
The number of shares of stock is: The age is capatation shall have to a (200), all of which shall appropriate the control of t	edinour pate	is of should	es which
Carbaration shall have table	shorty to	1220x 12 4	ruso no
ARTICLE V INITIAL OFFICERS/DIRECT	TOPS (antion of)	e, par a	CIUL.
The name(s) address(es) and title(s):			. 0-
Prosident: Shoron L. 511	12r 8347	Gorden G	ste t
•	, poor,	"Hogon",	L 1. 20
SECRETARY VIRGINIA STEI	CAMEL) 297	OF WORSI	AT OK
TREPOURER:	CORAL	588,100S	FLB
ARTICLE VI REGISTERED AGENT			,
The name and Florida street address of the register	ed agent is:	· ·	
SHOTON L. SILVET 83	347 Gardr	er Coopte	۲1. <u> </u>
7	oca Rode	on, FI 3	3433
ARTICLE VII INCORPORATOR			
The name and address of the Incorporator is:	ister (ettern) flag fje •		<i>i</i>
VIRGINIA STEINMA			
	, Coral S	prings, f	1. 3300
***************		*******	
Having been named as registered agent to accept service of pr	ocess for the above stated c	orporation at the place	designated in th
certificate, I am familiar with and accept the appointment as re	gistered agent and agree to	act in this capacity	
I have the		-/-	/23
Signature/Registered Agent		Date	103
Marmon Steinman		alnli	13
Signature/Incorporator	51 A 3	Date	
		·+ *	