P0400005788

(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: GAVE			
CORRECT ONTICLES A FILE COLUMN DE			
DATE 1/9 DOC. EXAM. BM			

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Ann la

TRANSMITTAL LETTER

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

SUBJECT: _				
Enclosed is an or	riginal and one (1) copy of the Certificat	e of Domestication and a check for:		
FEES:		•		
Certifica	te of Domestication	\$50.00		
Articles	of Incorporation and Certified Copy	<u>\$78.75</u>		
Total to	domesticate and file	\$128.75		
OPTIONAL:				
Certificate of Status		\$ 8.75		
	An			
FROM:	Alisha Johnson	r trond		
	Name (printed or typed)			
	8244 26th Ave N			
-	Address			
	St. Petersburg, Fl. 33710			
-	City, State &	Zip		
_	727-345-5805			
•	Daytime Telephon	e number		

CERTIFICATE OF DOMESTICATION

Γh	e undersigned, Alisha Rene Johnson	, President,	
	(Name)	(Title)	
of_	See 20/20 Vision, P.C.	a foreign corporation,	
in a	(Corporation Name) accordance with s. 607.1801, Florida Statutes, does hereby	y certify:	
1.	The date on which corporation was first formed was Oc	tober 17	
2.	The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was Texas		
3.	The name of the corporation immediately prior to the fill was See 20/20 Vision, P.C.	ing of this Certificate of Domestication	
4.	The name of the corporation, as set forth in its articles of s. 607.0202 and 607.0401 with this certificate is See 20.	•	
5.	The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was Dallas, Texas		
6.	Attached are Florida articles of incorporation to complet to s. 607.1801.	e the domestication requirements pursuant	
I aı	m Alisha Johnson , of See 20/20 Vision, P.C.		
and	d am authorized to sign this Certificate of Domestication of	on behalf of the corporation and have done	
so i	this the 24 day of December	, 2003	
	(Authorized Signatu	re)	

Filing Fee:

Certificate of Domestication
Articles of Incorporation and Certified Copy
Total to domesticate and file

\$50.00 \$78.75 \$128.75

4 JAN -2 PN 1: 2 ECRETARY OF STATE

INHS53 (6/03)

ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE: See 20/20 Vision, P.A.

PRINCIPAL OFFICE ARTICLE II

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS: 8244 26th Ave N St. Petersburg, Fl. 33710

ARTICLE III

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED: To provide optometric goods and services

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS:

ONE

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES: Alisha Johnson, President 8244 26th Ave N St. Petersburg, Fl. 33710

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND FLORIDA STREET ADDRESS OF THE REGISTERED AGENT IS: Chris Cornish 8600 134th St. North Seminole, Fl. 33776

ARTICLE VII **INCORPORATOR**

THE NAME AND ADDRESS OF THE INCORPORATOR IS: Alisha Johnson

8244,26th Ave N St. Fetersburg, Fl. 33/110

Having been mamed as registered agent and 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 CAPACIT

Signature/Registered Agent

Signature/Incorporator