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CORPORATION NAME(s) & DOCUMENT NUMBER	BER(S) (if known):	
· RICHARD PADRON. C	D.D. P.A.	
(Corporation Name)	(Document#)	
2. (Corporation Name)	(Document #)	
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Examiner's Initials

CR2E031(9/92)

ARTICLES OF INCORPORATION OF

The undersigned incorporator(s), for the purpose of forming a Professional Service Corporation under Chapter 621 of the Florida Statutes, hereby adopt(s) the following Articles of Incorporation

ARTICLE I NAME

The name of the corporation shall be:

RICHARD PADRON, O.D., P.A.

ARTICLE II PRINCIPAL OFFICE

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

2200 SW 16 ST. Svite 204

MIAME, FL 33145

ARTICLE III PURPOSE

The purpose of this corporation shall be:

OPTOMETRY and OPTICAL RETAIL

ARTICLE IV CAPITAL STOCK

The number of shares of stock that this corporation is authorize to have outstanding is:

100 shares

ARTICLE V INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

RICHARD PADRON
2200 SW 16 S.T ; Svite 204
MIAMI, FC 33145

ARTICLE VI BOARD OF DIRECTOR(S)

The name and address of the initial board of director(s) shall be:

RICHARD PADRON, 2200 SW 16 St Suite 204 MIAME, FL 33145

ARTICLE VII OFFICER(S)

The name, title and address of the officer(s) of this corporation shall be:

RICHARD PADRON, (PRESIDENT)
2200 SW 16 St
SUITE 204
MIAMI, FL 33145

ARTICLE VIII INCORPORATOR(S)

The name and address of the incoporator(s) to these Articles of Incorporation shall be:

RICHARD PADRON
2200 SW 16 St.
SUTTE 204
MELMI, FL 33145

The undersigned has (have) executed these Articles of Incorporation this 2 day of 1000, 2004.

Incorporator Signature

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERD OFFICE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

REGISTERED AGENT SIGNATURE

TALLAHASSEE, FINATE