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9/23/10

COVER LETTER

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

closed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED

Name (Printed or typed)

2826 S. University Dr. #3202

Address

Davie, Fl 33328

City, State & Zip

407-222-5869

Daytime Telephone number

E-mail address (to be used for future annual report notification)

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

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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS Division of Corporations

September 13, 2010

MATTHEW FOSTIER 2826 S. UNIVERSITY DRIVE #3202 DAVIE, FL 33328

SUBJECT: MATTHEW T. FOSTIER, O.D., P.A.

Ref. Number: W10000042977

We have received your document for MATTHEW T. FOSTIER, O.D., P.A. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected 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) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 510A00021720

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corporation shall be:

Matthew T. Fostier, O.D., P.A.

SECRETARY OF SECRE

2010 SEP 20 PM 3: 06

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

2826 S. University Dr. #3202 Davie, Fl 33328

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide optometric services to patients.

ARTICLE IV SHARES

The number of shares of stock is:



ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Matthew Fostier 2826 S. University Dr. #3202 Davie, Fl 33328

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Matthew Fostier 2826 S. University Dr. #3202 Davie, FI 33328

Having been named as registered agent 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 capacity

Matt fort	9/7/10
Signature/Registered Agent	Date
Mrstt Fort	9/7/10
Signature/Incorporator	Date