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Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850) 617-6381

From:  
Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.  
Account Number : 075350000353  
Phone : (212) 431-5000  
Fax Number : (212) 431-1441

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

FLORIDA PROFIT/NON PROFIT CORPORATION  
MENDELSONH EYE CENTER, PA

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

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TALLAHASSEE, FLORIDA

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J. Shivers DEC 02 2010



December 1, 2010

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

BLUMBERG/EXCELSIOR

SUBJECT: MENDELSON EYE CENTER, PA  
REF: W1000055732

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

An effective date may be added to the Articles of Incorporation if a 2011 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

If you have any further questions concerning your document, please call (850) 245-6929.

Justin M Shivers  
Regulatory Specialist II  
New Filing Section

FAX Aud. #: E10000256778  
Letter Number: 910A00027898

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: MENDELSON EYE CENTER, PA

ARTICLE II PRINCIPAL OFFICE

Principal street address
150 E. SUNRISE HIGHWAY
LINDENHURST, NY 11757-2502

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Ophthalmology and sale of related products

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: STEVEN L. MENDELSON, DIRECTOR Name and Title:
Address: 150 E. SUNRISE HIGHWAY Address:
LINDENHURST, NY 11757-2502

Name and Title: Name and Title:
Address: Address:

Name and Title: Name and Title:
Address: Address:

ARTICLE VI REGISTERED AGENT

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

Name: LAWRENCE WASSERMAN
Address: 1071 TWIN BRANCH LANE
WESTON, FL 33326

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: STEVEN L. MENDELSON
Address: 150 E. SUNRISE HIGHWAY
LINDENHURST, NY 11757-2502

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

Signature of Lawrence Wasserman

11-29-2010
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of Steven L. Mendelson
Required Signature/Incorporator

11-29-2010
Date

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