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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 : CSH SERVICES, LLC
Account Number : I20070000160
Phone : (800) 494-3124
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FLORIDA PROFIT/NON PROFIT CORPORATION

eyeDEFINITION EyeCare Inc.

Certificate of Status	0
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T. Burch AUG 8 2011

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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:

EYEDEFINITION EYECARE INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

715 N CALHOUN ST NO 1
TALLAHASSEE, FLORIDA 32303

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

100 COMMON SHARES NO PAR VALUE

ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and officers is:

DIRECTOR, PRESIDENT
CHRISTEN M. BRIENEN
715 N CALHOUN ST NO 1
TALLAHASSEE, FLORIDA 32303

VICE-PRESIDENT
MICAH DRAY BRIENEN
715 N CALHOUN ST NO 1
TALLAHASSEE, FLORIDA 32303

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TALLAHASSEE, FLORIDA

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PAGE 2 EYEDEFINITION EYECARE INC.

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

CHRISTEN M. BRIENEN
715 N CALHOUN ST NO 1
TALLAHASSEE, FLORIDA 32303

ARTICLE VII INCORPORATOR

The name and street address of the incorporator is:

CHRISTEN M. BRIENEN
715 N CALHOUN ST NO 1
TALLAHASSEE, FLORIDA 32303

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.


CHRISTEN M. BRIENEN / Registered Agent

8/4/11
Date


CHRISTEN M. BRIENEN / Incorporator

8/4/11
Date

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