P12/04

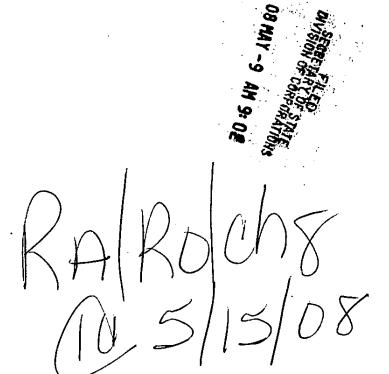
(Re	questor's Name)		
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COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: Cole Vision Corporation (Name of Corporation)				
DOCUMENT NUMBER: P12164				
The enclosed Statement of Change of Registered Office/Agent a	and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:				
Joanne Caswell (Name of Contact Pers	son)			
Continental Corporate Services, Inc. (Firm/Company)				
. (
189 Franklin Avenue, Suite 1 (Address)				
(Audress)				
Nutley, NJ 07110 (City/State and Zip Code)				
For further information concerning this matter, please call:				
Joanne Caswell at (89) (Name of Contact Person)	00) 300-5067 Area Code & Daytime Telephone Number)			
Enclosed is a \$35.00 check made payable to the Department of State.				
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporation or	0502, 607.1508, or 617.1508, Florida Statutes, this ganized under the laws of the State of Delaware gistered agent, or both, in the State of Florida.	—
1. The name of t	he corporation:	Cole Vision Corporation	
2. The principal	office address: 4000 LUXOTTICA	PL, MASON OH 45040-8114	
3. The mailing a	ddress (if different):		
4. Date of incorp	oration/qualification: 10-20-86/11-	17-86 Document number: P12164	
	street address of the current register tment of State:	ed agent and registered office on file with the	
	C T Corporation System	·	8 3
	1200 South Pine Island	Road	MAY MON
	Plantation, FL 33324		MAY -9 AM S
6. The name and (if changed):	•	agent (if changed) and /or registered office	OS MAY -9 AM 9: 00
	NRAI Services, Inc.		CA
	2731 Executive Park Dri		
	Weston, FL 33331		
The street addre	ess of its registered office and the st be identical.	reet address of the business office of its registered a	agent,
		opted by its board of directors or by an officer so in notified in writing of the change.	
(Signati	are of an officer of director)	Jack S. Dennis, Vice President (Printed or typed name and title)	
I hereby accept I further agree to of my duties, an document is hei	•	nt and agree to act in this capacity. statutes relative to the proper and complete perfor, obligation of my position as registered agent. Or, in the registered office address, I hereby confirm th inge.	mance if this at the
		86-0E-Y	
(Si	gnature of Registered Agent)	(Date)	
Joanne Ca	half of an entity: /大分 . Sマイ/ aswell, Vice President Typed or Printed Name)		

* * * FILING FEE: \$35.00 * * *