Florida Department of State Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000262277 3)))



H130002622773ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

0	28	FLORIDAS
W	က်	(F)
	-	
LL	E	L .
()	27	
U	13 NOV 2	77.
\propto	₩	그를벌
	₩.	155 E

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : KIM MARKS CPA

Account Number : I20120000072

Phone : (305)895-5815

Fax Number : (305)895-6273

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

		_		
F.m.	i	τ.	Address:	

COR AMND/RESTATE/CORRECT OR O/D RESIGN STARK VISION INC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

) ;

FILED

Articles of Amendment to Articles of Incorporation of

2013 NOV 27 AM 9: 41

SECT LARE OF STATE TALLAHASSEE, FLORIDA P13000094312 (Name of Corporation as currently filed with the Florida Dept. of State) STARK VISION INC (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: STARK VISION, INC. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

1.0

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: XChange	PT	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	Title		Name	Address
1) Change				
Add Remove				
2) Change		_		
Add Remove				
3) Change				
Remove				
4) Change				<u> </u>
Remove				
5) Change				
Add Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
ARTICLE VIII
A. The Company shall not engage in any business activity other than that which is
directly related to the operation of a Pearle Vision retail optical or such other business
operation as shall be approved in writing by "Pearle".
B. The total number of shareholders of the Company shall not exceed five (5) individuals
C. The Company shall neither encumber nor assign nor permit the transfer of any
shares in the Company without Pearle's prior written consent.
D. The transfer of this stock is subject to the terms and conditions of a Franchise Agree-
ment with Luxottica Retail North America Inc., Franchisor of Pearle Vision "Pearle"
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

1:

The date of each amendment(s) ad date this document was signed.	option:	it other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/vere ado by the shareholders was/were sur	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated_ 11/2;	7/3/	
Signature	Laur.	
	irector, president or other officer - If directors or officers have not been	
	d, by an incorporator - if in the hands of a receiver, trustee, or other court	
appoin	ted fiduciary by that fiduciary)	
	JANA STACK	
	(Typed or printed name of person signing)	-
	President	
	(Title of person signing)	