## P95000009637

### TRANSMITTAL LETTER

Department of State Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314	
SUBJECT: Cornea and Cataract Center, P.A.	2 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1
Proposed Corporate Name	
Enclosed is an original and one copy of the Articles of Incorpor registered agent, and a check for \$122.5 Mease return one copy of with the filing date.	of the Articles stamped
FROM:	F][
Kunwar S.S. Jain	
Name (print or type)	<u> </u>
5836 Riverside Lane	
Address	
Ft. Myers, F1. 33919-2506	
City, State, Zip	
813-936-0788	, ,
Area Code and Phone Number (Daytime)	1 p 2/3/95

### ARTICLES OF INCORPORATION OF

FILED
1995 FEB -1 FE 2: 00
TALLAIMAGULE, I LORIDA

Cornea and Cataract Center, P.A.

#### A Professional Association

The undersigned incorporator, for the purpose of forming a Professional Association under Florida's Professional Service Corporation Act, hereby adopts the following Articles of Incorporation.

The name of the Professional Association shall be:  Cornea and Cataract Center, P.A.
ARTICLE 2: PRINCIPAL PLACE OF BUSINESS The principal place of business of this Professional Association shall be (give sircet address and zip code): 5836 Riverside Lane, Ft. Myers, F1. 33919-
2506
ARTICLE 3: SHARES All stock issued by this Professional Association shall be common voting stock of a single class. The number of shares of stock that this Professional Association is authorized to have outstanding at any time is: 500
ARTICLE 4: INITIAL REGISTERED AGENT AND REGISTERED OFFICE The name of the initial registered agent is Kunwar S.S. Jain whose registered office is located at the place of business stated in Article 2 above.

ARTICLE 5: PURPOSE AND RESTRICTIONS

The purpose for which the Professional Association is organized is to engage in the licensed practice of medicine under regulation of the Florida Department of Professional Regulation. No officer, shareholder, employee, or agent chall practice any other occupation on behalf of, or in the name of, this Professional Association, except to the extent allowed by Florida law. No person shall become an officer, shareholder, employee, or agent of this Professional Association who does not possess a license to engage in the same occupation for which this Professional Association is organized except to the extent allowed by law. Should any such person lose the license to so practice, that person shall immediately sever all employment with, and financial interests in, this Professional Association.

ARTICLE 6: INCORPORATOR The name and street address of the incorporator to these Articles of Incorporation  Kunwar S.S. Jain	on ls:
5836 Riverside Lane, Ft. Myers, F1. 33919-2506	

The undersigned incorporator has executed these Articles of Incorporation this 26th Day of January 19 95

Signature

Articles of Incorporation Filing Fee —

# CERTIFICATE OF DESIGNATION OF 1995 FEB - 1 FIL 2: 00 REGISTERED AGENT/REGISTERED OFFICE ALLEGE AGENT/REGISTERED AGENT/REGISTERE

Pursuant to Florida law, the undersigned Corporation organized under the laws of the State
of Florida submits the following statement in designating the registered office/registered
agent, in the State of Florida.
The name of the corporation/professional association is:
Cornea and Cataract Center, P.A.
·
2. The name and address of the registered agent and office is:
<b>3</b>
Kunwar S.S. Jain
Full name
5836 Riverside Lane
Address (P.O. Box not acceptable)
Ft. Myers, F1. 33919 - 2506
City, State, and Zip
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF
DRIVERS BOD THE ADOVE STATED CORDON ATION AT THE BLACE DESCRIATED.

PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COM-PLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE OF REGISTERED AGENT

26th January 1995

DATE

Designation of Registered Agent Filing Fee --