D9600045280

Florida Secretary of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

900001919419 -05/13/96--01039--004 ****122.50 ****122.50

Re: Mark D. Salopek, O.D., P.A.

Enclosed please find original and one copy of the Articles of Incorporation for the above referenced corporation.

We have enclosed a check for

	\$ 70 - Filing Fee Only
	\$ 78.75 - Filing Fee and Certificate
_X	\$ 122.50 - Filing Fcc, Registered Agent and Certified Copy Fee
	\$ 131.25 - Filing Fee, Registered Agent, Certified Copy Fee and Certificate

Date: May 1, 1996

Name and Title: Mark D. Salopek

Address: 3076 NW Federal Highway, Jensen Beach, FL 34957

Phone Number: 407-692-1233

189,630,706,671 1196-10500



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

May 17, 1996

MARK D. SALOPEK 3076 N.W. FEDERAL HIGHWAY JENSEN BEACH, FL 34957

SUBJECT: MARK D. SALOPEK, O.D., P.A.

Ref. Number: W96000010500

We have received your document for MARK D. SALOPEK, O.D., P.A. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific nature of business of the professional association must be stated in the document.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6972.

Doris Brown Document Specialist

Letter Number: 796A00024559

ARTICLES OF INCORPORATION

OF -

Mark D. Salopek, O.D., P.A.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE NUMBER ONE - NAME

The name of the corporation shall be:

Mark D. Salopek, O.D., P.A.

ARTICLE NUMBER TWO - DURATION

The duration of the corporation is perpetual

ARTICLE NUMBER THREE - PURPOSE

The general purpose for which the corporation is organized is:

- 1. to provide optometric services to the general public and business establishments.
- 2. to transact any other lawful business for which corporations may be incorporated under the Florida General Corporations Act.
- 3. To do such other things as are incidental to the foregoing, or necessary or desirable, in order to accomplish the foregoing, including borrowing or raising money for any purpose of the corporation.

ARTICLE NUMBER FOUR - PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3076 NW Federal Highway, Jensen Beach, FL 34957

ARTICLE NUMBER FIVE - CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 Shares

ARTICLE NUMBER SIX - INITIAL REGISTERED AGENT AND REGISTERED OFFICE:

The name and address of the initial registered agent is:

Mark D. Salopek 3076 NW Federal Highway, Jensen Beach, FL 34957

ARTICLE NUMBER SEVEN - INCORPORATORS

The name(s) and street address of the incorporator(s) is (are):

Mark D. Salopek 2071 NW 21st Terrace #106, Stuart, FL 34994

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 21st day of May, 1996

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT AND REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating it's registered office and registered agent, in the State of Florida.

The name of the corporation is: Mark D. Salopek, O.D., P.A.

The name and address of the registered agent and office is:

Mark D. Salopek 3076 NW Federal Highway, Jensen Beach, FL 34957

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF 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 COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE DATE