1201 HAYS STRILE THEATHASSIA II. 32300-2607 540-312-180-86 101-22-193-14

networks

THIS HALL SHALL ACCOUNT NO. : 07210000032

REFERENCE: 000965 4385783

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE: June 26, 1996

ORDER TIME : 10:03 AM

ORDER NO. : 000965

CUSTOMER NO: 4385783

CUSTOMER: Ms. Linda Bittner

AMERICAN OPHTHALMIC, INC.

Suite 600

250 South Park Avenue Winter Park, FL 32789

DOMESTIC FILING

NAME: AMERICAN OPHTHALMIC OF

MIAMI, INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY

XX PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Deborah Schroder

EXAMINER'S INITIALS:

(10/27/94

3.1

SECRETARY OF STATE DIVISION OF CORPORATIONS 96 JUN 26 AM 91 24

Articles of Incorporation of American Ophthalmic of Miami, Inc.

ARTICLE I

Name and Duration

The name of the Corporation is American Ophthalmic of Miami, Inc. The duration of the Corporation is perpetual. This Corporation shall begin its corporate existence as of the 26th day of June, 1996 the date of filing with the Secretary of State.

ARTICLE II

Principal Office

The address of the principal office of the Corporation is: 250 South Park Avenue, Suite 600, Winter Park, FL 32785.

ARTICLE III

Registered Office and Agent

The address of the registered office in the State of Florida is 1201 Hays Street. Tallahassee, FL 32301. The name of the registered agent at such address is Corporation Service Company.

ARTICLE IV

Corporate Purposes, Powers and Rights

- 1. The nature of the business to be conducted or promoted and the purposes of the Corporation are to engage in any lawful act or activity for which corporations may be organized under the Florida Business Corporation Act.
- 2. In furtherance of its corporate purposes, the Corporation shall have all of the general and specific powers and rights granted to and conferred on a corporation by the Florida Business Corporation Act.

ARTICLE Y

Capital Stock

1. The total number of shares of capital stock which the Corporation has the authority to issue is 100,000 shares of Common Stock ("Common Stock") \$0.01 par value per share.

ARTICLE VI

Incorporator

The name and mailing address of the incorporator of this Corporation is as follows:

Name

Address

Kathryn L. Sweers

250 South Park Avenue

Suite 200

Winter Park, Florida 32789

ARTICLE VI

Board of Directors

- 1. The number of members of the Board of Directors may be increased or diminished from time to time by the Bylaws; provided, however, there shall never be less than one. Each director shall serve until the next annual meeting of shareholders.
- 2. If any vacancy occurs in the Board of Directors during a term, the remaining directors, by affirmative vote of a majority thereof, may elect a director to fill the vacancy until the next annual meeting of shareholders.
- 3. The names and mailing addresses of the persons who shall serve as directors of the Corporation until the first annual meeting of the shareholders are as follows:

Name

Address

Mitchell G. Billing

250 South Park Avenue

Sulte 200

Winter Park, Florida 32789

Thomas R. Whatley Jr.

250 South Park Avenue

Suite 200

Winter Park, Florida 32789

ARTICLE VII

Amendment

The Corporation reserves the right to amend, alter, change or repeal any provision contained in these Articles of Incorporation, in the manner now or hereafter prescribed by statute, and all rights conferred upon shareholders herein are granted subject to this reservation.

ARTICLE VIII

Bylaws

The power to adopt, amend or repeal bylaws for the management of this Corporation shall be vested in the Board of Directors or the shareholders, but the Board of Directors may not amend or repeal any bylaw adopted by the shareholders if the shareholders specifically provide that such bylaw is not subject to amendment or repeal by the Board of Directors.

ARTICLE_IX

Indemnification

The Corporation shall indemnify any incorporator, officer or director, or any former incorporator, officer or director, to the full extent permitted by law.

Signatures Appear on Following Page

DATED at Winter Park, Orange County, Florida, this 25th day of June, 1996.

		By: Lally Mee. Kathyn Sweers
STATE OF FLORIDA)) SS.	
COUNTY OF ORANGE)	
Kathryn Sweers, incorporate corporation. She is personally and did (did not) take an oath MICHELLE My Comm	or of American Or y known to me or ha h, E SUE MATHEY n Exp. 7/09/06	Acknowledged before me this 25th day of June, 1996, by obthalmic of Miami, Inc., a corporation, on behalf of the as produced NA as identification (Notary Signature) (Notary Name Printed) NOTARY PUBLIC Commission No. (C. 213344)

REGISTERED AGENT CERTIFICATE

96 JUN 26 AH 9: 24

In pursuance of the Florida Business Corporation Act, the following is submitted, in compliance with said statute:

That American Ophthalmic of Miami, Inc. desiring to organize under the laws

of the State of Florida, with its registered office, as indicated in the Articles of Incorporation at the City

of Tallahassee, County of Leon, State of Florida, has named Corporation Service Company, located at

said registered office, as its registered agent to accept service of process and perform such other duties as

are required in the State.

ACKNOWLEDGMENT:

Having been named to accept service of process and serve as registered agent for the

above-stated Corporation, at the place designated in this Certificate, the undersigned, by and through its

duly elected officer, hereby accepts to act in this capacity, and agrees to comply with the provision of said

statute relative in keeping open said office, and further states that it is familiar with §607.0501, Florida

Statutes.

Corporation Service Company.

Agent

DATED: June 26, 1996

WP:F:User/Bit/Entity/F1/CorpForm/Articles.sol

CAPITOL CORPORATE SERVICES, INC.

P96000054649

December 26, 1996

FLORIDA SECRETARY OF STATE P. O. Box 6327 Tallahassee, FL 32314

Attn: Corporate Filing Dept.

Re: AMERICAN OPHTHALMIC OF MIAMI, INC.

000002044020--2 -01/03/97--01026--006 *****35.00 *****35.00

Dear Filing Clerk:

Enclosed please find a Statement of Change of Registered Office/Agent, for the above referenced name, which is to be filed in your office. I have enclosed check # 0985 in the amount of \$ 35.00 for the filing fee. After filing please return to me the file-stamped copy in the enclosed self-addressed envelope. If you have any questions please contact me at 800-472-0544.

Thank you,

Delanie Lundgren

Ollanie Lundgun

enclosures

FILED

97 JAN -2 AHII: 23

BECRETARY OF STATE
ALLAHASSEE, FLORID.

Florida Department of State, Jim Smith, Secretary of State

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

Florida Statutes, the undersigned corpo	607.0502, 617.0502, 607.1508, or 617.1508, pration organized under the laws of the State of statement in order to change its registered office	
or registered agent, or both, in the Stat		
1a. The name of the corporation is:		
1b. Date of incorporation: 6/26/96	Document number	
2. The name and address of the curre componation service company		
1201 Hays Street, Tallahasses, F1	32301-2525 ASS	
3. The name and address of the new r (P.O. Box Not Acceptable NRAI Services, Inc.		
526 East Park Avenue, Tallahamee, Fiorida 3230 The street address of its registered agent of its registered agent as changed will be	nt and the street address of the business office	
Such change was authorized by resolut an officer so authorized by the board.	ion duly adopted by its board of directors or by	
SIGNATURE December 17, 1996	Richard J. D'Amico, Vice President Typed or printed name and title	
DATE		
PROCESS FOR THE ABOVE STATED C IN THIS CERTIFICATE, I HEREBY ACCI AGENT AND AGREE TO ACT IN THIS (D AGENT AND TO ACCEPT SERVICE OF CORPORATION AT THE PLACE DESIGNATED EPT THE APPOINTMENT AS REGISTERED CAPACITY. I FURTHER AGREE TO COMPLY UTES RELATIVE TO THE PROPER AND COM-	

PLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

NRAI Services, Inc.

SIGNATURE BY: Olanuhundgun asst

(Registered Agent) pec

FILING FEE: **\$35.00**



February 27, 1997

Secretary of State Corporate Records Bureau **Division of Corporations** Dept. of State 409 East Gains St., 20th Floor Tallahassee, FL 32399

Re:

American Ophthalmic of Lake County, Inc.

American Ophthalmic of Miami, Inc.

Dear Madam/Sir:

Please find enclosed, the Articles of Dissolution for each of the above referenced corporations.

Please file and forward evidence in the enclosed self-addressed, stamped envelope I have provided for your convenience.

If you have any problems or questions regarding the filing, please contact me at 972-982-8264.

Thank you in advance for your prompt assistance.

Pamela Arsenault Legal Assistant

enclosures

ARTICLES OF DISSOLUTION

Pursuant to 607.1401, Florida Statutes, this corporation submits the following articles of dissolution: The name of the corporation is American Ophthalmic of Miami, Inc. FIRST: The articles of incorporation were filed on June 26, 1996. SECOND: None of the corporation's shares have been issued. THIRD: The corporation has not commenced business. \square No debt of the corporation remains unpaid. FOURTH: The net assets of the corporation remaining after winding up have been FIFTH: distributed to the shareholders, if shares were issued. Adoption of Dissolution SIXTH: A majority of the incorporators authorized the dissolution A majority of the directors authorized the dissolution. Signed this 275 day of February, 1997.

Signature Mahard & Rever

Richard J. D'Amico, Vice President