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TRANSMITTAL LETTER

Department of State **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

000002054320---01/10/97--01099--019 ****122.50 ****122.50

SUBJECT: Eve Care Boutique of Ocala, Inc. (proposed corporate name)

Enclosed please find an original and one (1) copy of the articles of incorporation for the above corporation and check in the amount of \$ 122.50

FROM:

C. Glenn Fulk Name P.O. Box 70257 Address Ocala, Fl. 34470 City, State, & Zip 352) 624-3948 Telephone Number

Note: Additional copy of articles is needed when certified copy is requested.

JAN 1 6 1997

ARTICLES OF INCORPORATION

QF

EYE CARE BOUTT QUE OF COLALA, INC.

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 I NAME

The name of the corporation shall be:

EYE CARE BOUTIQUE OF OCALA, INC.

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ARTICLE II PRINCIPAL OFFICE

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

603 SE Ft. King St. Ocala, Florida 34471

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 500 Common Stock

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is

Deborah A. Hillgaertner 603 SE Ft. King St. Ocala, Florida 34471

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Deborah A. Hillgaertner 603 SE FT. King St. Ocala, Florida 34471

The undersigned has(have) exec	cuted these Articles of Incorporation this	
day of	<u>January</u> 19 <u>97</u> .	
	Dibores a Hellauthe Signature/Title	Incorporator
	Signature/Title	
	Signature/Title	

CERTIFICATE OF DESIGNATION REGISTERED AGENT/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 the registered office/registered agent, in the State of Florida.

1.	The name of the corporation is Eye Care soutique of Ocala, Inc.	
2.	The name and address of the registered agent and office	is:
	Deborah A. Hillgaertner (NAME) 603 SE Ft. King St. (P.O. BOX NOT ACCEPTABLE)	97 JAN
	Ocala, Florida 34471 (CITY/STATE/ZIP)	ILED 10 PH 2: 35 ASSEE, FLORIDA

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.

DATE 1-8 97