

P97000051167

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

*C. Coulliette*  
C.COULLIETTE

MAR 09 2011

EXAMINER

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Medical Optics, Inc

(Name of Corporation)

**DOCUMENT NUMBER:** P97000051167

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Frank Malvasio

(Name of Person)

Medical Optics, Inc.

(Name of Firm/Company)

10320 West McNab Road

(Address)

Tamarac, Florida 33321

(City/State and Zip Code)

For further information concerning this matter, please call:

Frank Malvasio

(Name of Person)

at ( 954 ) 838-8600

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Street Address:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Mailing Address:**

Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

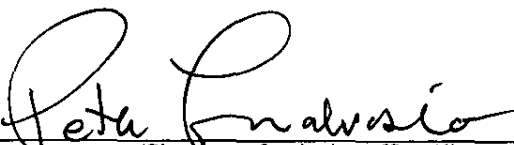
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Peter Malvasio, hereby resign as Director  
(Title)

of Medical Optics, Inc.  
(Name of Corporation)

P97000051167, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

  
(Signature of resigning officer/director)

**FILING FEE IS \$35.00**

**Make checks payable to Florida Department of State and mail to:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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