79700028302

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

Tallahassee, FL 32314				
SUBJECT:	New Eyes (Proposed co	OPTIC 4 C	S suffix)	_
Enclosed is an original	and one(1) copy of the article	·	L 00002287 -09/08/97 *****78.75 check for:	01130018
\$70.00 Filing Fee	☑\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM:	Alfred Con Name (Pr	nutushtou inted or typed)		-
	5.35 NW 98	address		
Plantation fl 33324 City, State & Zip				
	56	o/ 367/42 elephone number	SECRETARY OF STATE TALLAHASSEE, FLORIDA	FILED 97 SEP -8 PH 12: 02

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

New Eyes optical Co.

ARTICLE II PRINCIPAL OFFICE

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

535 NW 98th AUR Plantation FI 33324

ARTICLE III SHARES

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

102

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

AlFred Connaughton 535 NW 98th Ave Plantation Fl 33324

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Alfred Connaughton
535 NW9PT AVE
Plantation F1 3332-1

Signature/Incorporator

9/4/97 Date

(An additional article must be added if an effective date is requested.)

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/Registered Agent

Cometa

Date