P48000038155

Secretary of State Division of Corporations P. O. Box 6327 Tulahassee, FL 32314

Re: DR. LUCIA N	. LUU, O'D, PA, Inc.			
Gentlemen:	7000024618475 -03/19/9801030015 ****122.50 ****122.50			
Enclosed please find the original and one copy of anount of \$122,50.	Articles of Incorporation, together with my check in the			
This tepresents the cost of the Filing Fees, Cer Registered Agent Designation for the above the	Hillied Copy of Articles of Incorporation and Fee free			
	Very Ituly yours, Very Ituly yours, 98 APR 28			
	PR 2			
•	ORDET STATE OF STATE			
•	LUCIA N. LUU (individual's name)			
* 	DR. LUCIA N. LUU, OD, PA (name of corporation)			
	MAILING ADDRESS OF CORPORATION			
	7208 WAREHAM DR.			
,	7200 WAREHAN DR.			
•	TAMPA, FL. 33647			
e de la companya de				
•	Áréa Code Number Ext.			

Seminole Form 215: Ligns, Letter 17.90



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

March 20, 1998

DR. LUCIA N. LUU, OD, PA 7208 WAREHAM DR. TAMPA, FL 33647

SUBJECT: DR. LUCIA N. LUU, OD, PA

Ref. Number: W98000006255

We have received your document for DR. LUCIA N. LUU, OD, PA 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.

Please return the original and one copy of 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 (850) 487-6995.

Wanda Sampson Document Specialist

Letter Number: 398A00015134

ARTICLES OF INCORPORATION OF DR. LUCIA N. LUU, OD, PA

	(Name of Corporation)		
he undersign	ned subscriber(s) to these Articles of Inco.	rporation, natural person(s) con	petent to contract, hereby form a	
orporation u	nder the laws of the State of Florida.			ڡۣ
	-	E I - CORPORATE NAM	E	98 AT 11 - 1
he name of t	the corporation is:	STA N. 1100 OD 05		1
	DR. LUC	CIA N. LUU, OD, PA		
		ICLE II - DURATION		
he corporati	ion shall exist perpetually unless dissolved	i according to Fioriaa law.		
	ART	ICLE III - PURPOSE		
he corporati	ion is organized for the purpose of engagi	ing in any activities or business j	permitted under the laws of the Uni	ted S
nd the State	of Florida The business invo	olves optometric se	rvices such as eye e	xaı
nd optic	cal goods.	LE IV- CAPITAL STOCI	r	
he Corporat	tion to authorized to leave ONE THO	USAND thores (1000 of	ONE Dollar(s)	
1.00) par value Coffnmon Stock, which shall	be designated "Common Share:	r. "	
	ARTICI E V_ INITIA	L REGISTERED OFFIC	E AND AGENT	
he principal	I office, if known, or the mailing address			
Vame:	DR. LUCIA N. LUU, C	DD, PA		_
	7208 WAREHAM DR.			
4ddress:	7206 WAREHAM DK:			
~1 .	TAMPA	Florida	336 Zip	4/
City:	nd street address of the Initial Registered .			
	UCIA N. LUU	agent of this corporation is		
		<u> </u>	<u></u>	_
Address:_	7208 WAREHAM DR.			
			<i>Zip</i> 336	47
City:	TAMPA	Florida	Zipoo	
diminished f	ntion shall have ONE 1 from time to time by the Bylaws, but shall ration are as follows:	NITIAL BOARD OF DIA) directors initially. The number never be less than one (1). The	er of directors may be either increa	sed o direc
Narkel	LUCIA N. LUU	•		—
Address: <u>'</u>	7208 WAREHAM DR.	,		_
City:	TAMPA	State: FL.	Zip: ⁻³³⁶⁴⁷	
Name:	•			
Address:_				
Chanc	•	State:	Zip:	
City:		Jiuie	<i></i>	

ARTICLE VII - INCORPORATORS ators signing these Articles of Incorporation are as follows:

he names and addresses of the inc	TITATA NI TI	U .		
Vame:		:		
Address:	7208 WAREHA	M DR.		
City: TAMPA	State:	FL.	Zip: 33647	<u>.</u>
Name:				
Address:				
City:	. State:		Zip:	
Name:				
Address:				
City:	State:		Zip:	
IN WITNESS WHEREOF, the und	lersigned subscriber(s) ha	rè executed these Ari	icles of Incorporation this	- .
day of, 19	<u>_</u> .			(seal
	,		<u> </u>	(seal
	•			(seal
STATE OF FLORIDA	· · · · · · · · · · · · · · · · · · ·	SS	•	
county of Hillsb	orough			
before me, a Notary Public author appeared:		ents in the State and	County set forth above, personally	
/ /		EL DOILLE	RS LICENSE	
Signature		Form	of Identification	
Signature		Form	of Identification	
		F. French A	*	
Signature		Form of	Identification	
before methal LUCIA N. L.	UU executed these A person as indicated oppo	Irticles of Incorpora Ista each name, and	of Incorporation, who acknowledged lon, that I relied upon the form of that an oath (was) (was not) taken.	
Norarju Rubber Stamp S			icial seal in the County and State last y of March 1998	
→ RAD → My Comm	rke ussion CC579653 ug. 25, 2000	Notary Si	malure Hickly	
b. s. of		Gw	en Zierke	-

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

DR. LUCIA N. LUU, OD, PA
(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501 the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation at 7208 WAREHAM DR.

TAMPA, FL. 33647

has named LUCIA N. LUU

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

Successor Successor (registered agent)