

STATE OF ALABAMA

**DOMESTIC BUSINESS CORPORATION
CERTIFICATE OF FORMATION**

PURPOSE: In order to form a Business Corporation (formerly known as For-Profit Corporation) under Section 10A-1-3.05 and 10A-2-2.02 of the Code of Alabama 1975 this Certificate Of Formation and the appropriate filing fees must be filed with the Office of the Judge of Probate in the county where the corporation's initial registered office is located. **The information required in this form is required by Title 10A.**

INSTRUCTIONS: Mail one (1) signed original and two (2) copies of this completed form and the appropriate filing fees to the Office of the Judge of Probate in the county where the corporation's registered office is/will be located. Contact the Judge of Probate's Office to determine the county filing fees. **Make a separate check or money order payable to the Secretary of State for the state filing fee of \$100.00** and the Judge of Probate's Office will transmit the fee along with a certified copy of the Certificate to the Office of the Secretary of State within 10 days after the Certificate is issued. Once the Secretary of State's Office has indexed the filing the information will appear at www.sos.alabama.gov under the Government Records tab and the Business Entity Records link – you may search by entity name. Your notification of filing was provided by the Probate Judge's Office via a stamped copy and the Secretary of State's Office does not send out a copy. You may pay the Secretary of State fees by credit card if the county you are filing in will accept that method of payment (see attached). Your corporation will not be indexed if the credit card does not authorize and will be removed from the index if the check is dishonored.

(For County Probate Office Use Only)



20120809000294320 1/4 \$156.00
Shelby Cnty Judge of Probate, AL
08/09/2012 03:08:02 PM FILED/CERT

This form must be typed or laser printed.

1. The name of the corporation (must contain the word "corporation" or "incorporated," or the abbreviation of one of those words, and comply with Code of Alabama Title 10A-1-5.04):

Alabaster Eye Care, Inc.

2. **A copy of the Name Reservation certificate from the Office of the Secretary of State must be attached.**

(For SOS Office Use Only)

This form was prepared by: (type name and full address)

Graham Rowland 2344
Dalton Drive, Pelham AL 35124

DOMESTIC BUSINESS CORPORATION CERTIFICATE OF FORMATION

3. Street (**No PO Boxes**) address of principal office of the corporation:__

2344 Dalton Drive, Pelham AL 35124

Mailing address of principal office (if different from street address):__

4. The name of the Registered Agent: **Graham Rowland**

Street (**No PO Boxes**) address of Registered Agent:__

2344 Dalton Drive, Pelham AL 35124

Mailing address of Registered Agent (if different from street address):__

5. Purpose for which corporation is formed:__

For the practice of optometry--to provide primary eyecare to the general public. ; the purpose includes the transaction of any lawful business for which corporations may be incorporated in Alabama under Title 10A, Chapter 2 of the Code of Alabama.

6. Number of Shares the corporation is authorized to issue: ¹⁰⁰ Par Value
(Par value is optional information and does not have to be completed.)

7. Period of duration shall be perpetual unless stated otherwise by an attached exhibit.

8. The name(s) of the Incorporator(s): **Graham Rowland**

Street (**No PO Boxes**) address of Incorporator(s):__

2344 Dalton Drive, Pelham AL 35124

Mailing address of Incorporator(s) – (if

different from street address):__

Attach a listing if more Incorporators need to be added.

9. Director's Name: **Graham Rowland**

Street (**No PO Boxes**) address of Director:__

2344 Dalton Drive, Pelham AL 35124

Mailing address of Director(s) - (if different

from street address):__



DOMESTIC BUSINESS CORPORATION CERTIFICATE OF FORMATION

Director's Name: _____

Street (**No PO Boxes**) address of Director: _____

_____ Mailing address of Director(s) - (if different from street address): _____

Director's Name: _____

Street (**No PO Boxes**) address of Director: _____

_____ Mailing address of Director(s) - (if different from street address): _____

Attach listing if more Directors need to be added.

10. A director has no liability to the corporation or its shareholders for money damages for any action taken, or any failure to take any action, as a director, except liability for (A) the amount of financial benefit received by a director to which he or she is not entitled; (B) an intentional infliction of harm on the corporation or the shareholders; (C) a violation of Section 10A-2-8.33; (D) an intentional violation of criminal law; or (E) a breach of the director's duty of loyalty to the corporation or its shareholders.

Attached are any other provisions that are not inconsistent with law relating to organization, ownership, governance, business, or affairs of the corporation.

7 / 31 / 2012
Date _____ / _____ / _____ (MM/DD/YYYY)



Signature as required by 10A-2-1.20

Graham Rowland

Typed Name or Above Signature

Chief Executive Officer

Typed Title/Capacity to Sign under 10A-2-1.20



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Beth Chapman
Secretary of State

P. O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, Beth Chapman, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

pursuant to the provisions of Title 10A, Chapter 1, Article 5, *Code of Alabama 1975*, and upon an examination of the entity records on file in this office, the following entity name is reserved as available:

Alabaster Eye Care, Inc.

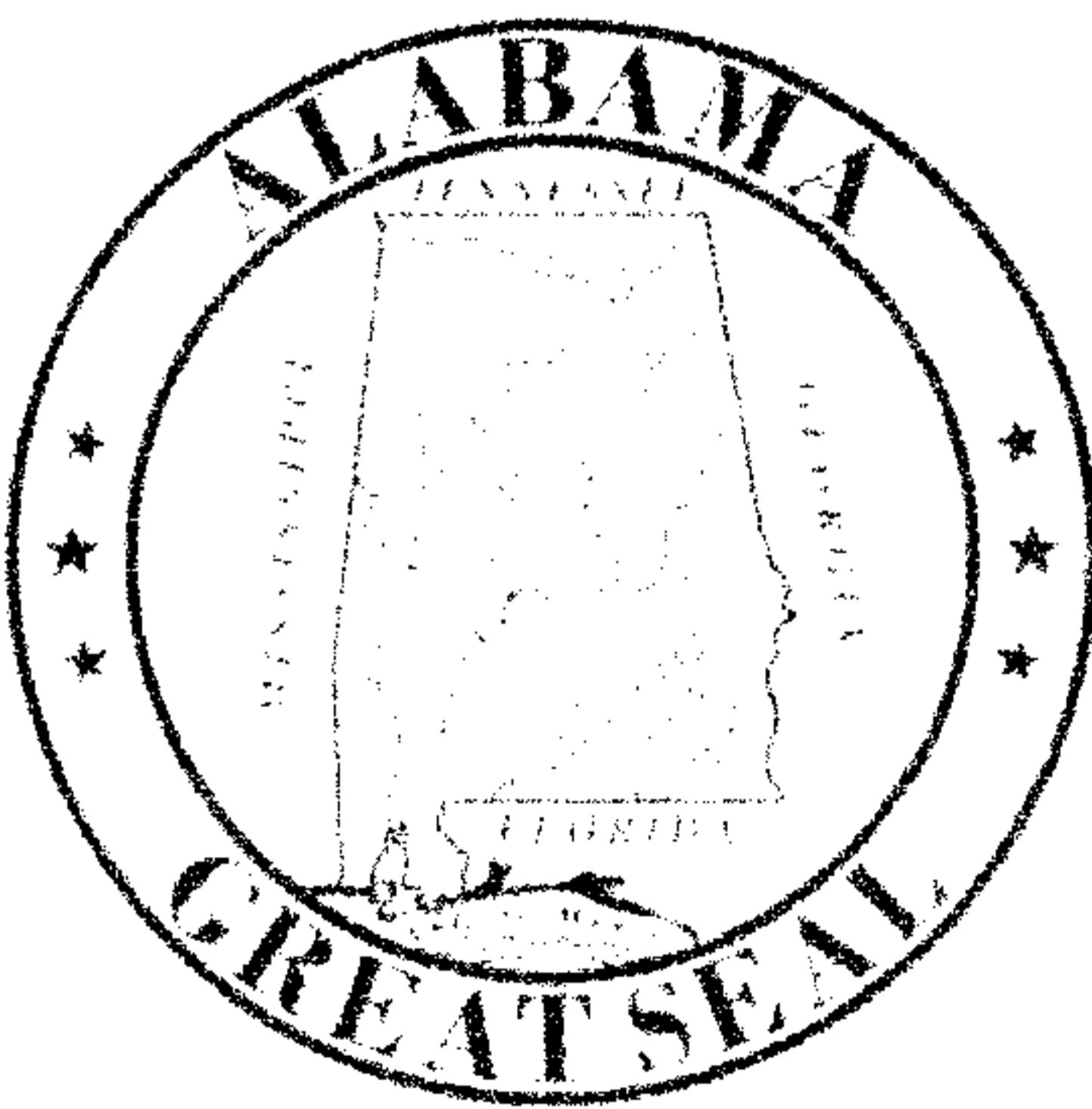
This domestic business corporation is proposed to be formed in Alabama and is for the exclusive use of Graham Rowland, 2344 Dalton Drive, Pelham, AL 35124 for a period of one hundred twenty days beginning July 31, 2012 and expiring November 28, 2012.

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

July 31, 2012

Date

Beth Chapman



608-351

Beth Chapman

Secretary of State



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