

Filing Fee: \$20.00

ID Number: 119881



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

LIMITED LIABILITY COMPANY

STATEMENT OF CHANGE OF RESIDENT AGENT

Pursuant to the provisions of Section 7-16-11 of the General Laws, 1956, as amended, the undersigned authorizes a change of its resident agent and the address of its resident agent in the state of Rhode Island as follows:

- The name of the limited liability company is:
Eyemed Vision Care LLC
- The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:
10 Weybosset Street, Providence, RI 02903
- The NEW address of the resident agent is:
222 Jefferson Blvd., Suite 200, Warwick, RI 02888
- The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:
CT Corporation System
- The name of the NEW resident agent is:
National Registered Agents, Inc.
- The appointment of a new resident agent and the change of address of the resident agent, as the case may be, shall become effective upon the filing of this statement.

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SECRETARY OF STATE
CORPORATIONS DIVISION
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Under penalty of perjury, I declare that the information contained herein is true and correct.

Date: 6/24/08

Eyemed Vision Care LLC

Print Name of Limited Liability Company

LensCrafters, Inc., as sole member of Eyemed Vision Care LLC

By: Jack S. Dennis VP

Signature of Authorized Person

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By DLR

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