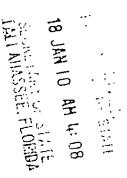
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COVER LETTER

Division of Corporations SUBJECT: Toshiba Medical Research Institute USA Inc. Name of Corporation DOCUMENT NUMBER: F09000003144 The enclosed Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person Firm/Company Address City/State and Zip Code tharrington@tams.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount: \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is \$43.75 Filing Fee & Certificate of Status \$43.75 Filing Fee & \$35.00 Filing Fee Certified Copy (Additional copy is enclosed) enclosed) Street Address: Mailing Address: Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301

TO:

Amendment Section

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant	to s. 607.1504, F.S.)	
(1-3 MU: 1-09000003144	SECTION I ST BE COMPLETED)	of State)
(Document num	ber of corporation (if known)	
1. Toshiba Medical Research Institute USA Inc.	ars on the records of the Department	of State)
		or state)
2. Delaware (Incorporated under laws of)	3.08/06/2009	to do business in Florida)
	SECTION II LY THE APPLICABLE CHANGES	
(*		
4. If the amendment changes the name of the corpora	ation, when was the change eff	ected under the laws of
its jurisdiction of incorporation? 01/04/2018		
5. Canon Medical Research USA, Inc. (Name of corporation after the amendment, addin appropriate abbreviation, if not contained in new	name of the corporation)	
(If new name is unavailable in Florida, enter altern business in Florida)	nate corporate name adopted fo	rithe purpose of transacting
6. If the amendment changes the period of duration,	indicate new period of duration	n.
		1
· · · · · · · · · · · · · · · · · · ·	(New duration)	7
7. If the amendment changes the jurisdiction of inco	rporation, indicate new jurisdic	etion.
<u> </u>	New jurisdiction)	-
8. Attached is a certificate or document of similar in 90 days prior to delivery of the application to the having custody of corporate records in the jurisdiction.	nport, evidencing the amendme Department of State, by the Se ction under the laws of which i	ent, authenticated not more than cretary of State or other official t is incorporated.
- Coffan		1
(Agnature of a director,	president or other officer - if in the hourt appointed fiduciary, by that fiduc	ands iary)
John Patterson		resident and Controller
(Typed or printed name of person signing)	(Title of	person signing)

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID "TOSHIBA MEDICAL

RESEARCH INSTITUTE USA, INC.", FILED A CERTIFICATE OF AMENDMENT,

CHANGING ITS NAME TO "CANON MEDICAL RESEARCH USA, INC." ON THE

EIGHTEENTH DAY OF DECEMBER, A.D. 2017, AT 7:32 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF
THE AFORESAID CERTIFICATE OF AMENDMENT IS THE FOURTH DAY OF

JANUARY, A.D. 2018.

Authentication: 203799998

Date: 12-20-17