844085

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DEC 1 9 2016

D CONNELL

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 418186 4312752

AUTHORIZATION :

COST LIMIT : \$ (3/5,00

ORDER DATE: December 13, 2016

ORDER TIME : 12:04 PM

ORDER NO. : 418186-010

CUSTOMER NO: 4312752

FOREIGN FILINGS

NAME: TISSUE BANKS INTERNATIONAL,

INC.

XX CORPORATE
LIMITED PARTNERSHIP
LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 15, 2016

RESUBMIT

Please give original submission date as file date.

CSC

ATTN: COURTNEY WILLIAMS

SUBJECT: TISSUE BANKS INTERNATIONAL, INCORPORATED

Ref. Number: 844085

We have received your document for TISSUE BANKS INTERNATIONAL, INCORPORATED and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

The current name of the entity is as referenced above. Please correct your document accordingly.

Please return 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) 245-6050.

Darlene Connell Regulatory Specialist III

Letter Number: 016A00026725

COVER LETTER

Amendment Section Division of Corporations	
SUBJECT: TISSUE BANKS INTERNATI	IONAL, INCORPORATED
Nar	me of Corporation
DOCUMENT NUMBER: 844085	
The enclosed Amendment and fee are sub	bmitted for filing.
Please return all correspondence concerni	ing this matter to the following:
Patricia B. Chouinard	
Name of Contact Person	
Shipman & Goodwin LLP	
Firm/Company	Marine Control of the
One Constitution Plaza	
Address	
Hartford, CT 06103-1919	
City/State and Zip Code	,
pchouinard@goodwin.com	
E-mail address: (to be used for future a	nnual report notification)
For further information concerning this m	natter, please call:
Patricia B. Chouinard	860 251-5930
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amo	ount:
X \$35.00 Filing Fee \$43.75 Filing Fe Certificate of St	\$52.50 Filing Fee, Certified Copy (Additional copy is cnclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Mailing Address:	Street Address:
P.O. Box 6327	<u>-</u>
Address Hartford, CT 06103-1919 City/State and Zip Code pchouinard@goodwin.com E-mail address: (to be used for future at For further information concerning this m Patricia B. Chouinard Name of Contact Person Enclosed is a check for the following ame X \$35.00 Filing Fee \$43.75 Filing Fe Certificate of St Mailing Address: Amendment Section Division of Corporations	natter, please call: at (

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

NOT FOR PROFIT CORPORATION APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR CONDUCTING AFFAIRS IN FLORIDA

(Pursuant to s. 617.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

(Document Number of Corporation (If known) TISSUE BANKS INTERNATIONAL, INCORPORATED (Name of corporation as it appears on the records of the Department of State) Maryland (Incorporated under laws of) (Date authorized to conduct affairs in Florida) SECTION II (4-8 COMPLETE ONLY THE APPLICABLE CHANGES) 4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? December \$\mathbb{X}, 2016 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. KeraLink International, Inc. 5. (Name of corporation after the amendment, adding suffix "corporation," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation. "Company," or "Co.." may not be used as a corporate suffix by a nonprofit 6. If the amendment changes the period of duration, indicate new period of duration and the date the change was effected. (New duration) (Date) 7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction and the date the change was effected. (New jurisdiction) (Date) 8. If the purpose which the corporation intends to pursue in Florida has changed, indicate new purpose. (The corporation is authorized to pursue such purpose in the jurisdiction of its incorporation) 9. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated. (Signature of the chairman or vice chairman of the board, president, or other officer – if in the hands of a receiver, trustee, or other court-appointed fiduciary, by that fiduciary) Douglas J. Furlong Chief Executive Officer

(Title of person signing)

(Typed or printed name of the person signing)

STATE OF MARYLAND Department of Assessments and Taxation

I, MICHAEL L. HIGGS OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT TISSUE BANKS INTERNATIONAL, INC. FILED ITS ARTICLES OF AMENDMENT WITH A NAME CHANGE CHANGING ITS NAME TO KERALINK INTERNATIONAL, INC. WITH THIS DEPARTMENT ON DECEMBER 7, 20016 AND THAT THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS DECEMBER 08, 2016.

Michael L. Higgs **Deputy Director**



301 West Preston Street, Baltimore, Maryland 21201 Telephone Balto. Metro (410) 767-1344 / Outside Balto. Metro (888) 246-5941 0010434515 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice Fax (410) 333-7097