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To:

Division of Corporations Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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Electronic Filing Menu

Corporate Filing Menu





19542080845 From: Ranae McGraw Page 1 of 2

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						Corporation			
		F04000005318 DOCUMENT NUMBER:							
		The en	closed Statemer	nt of Change c	of Registered Offic	ce/Agent and fee are	e submitted fo	r filing.	
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2017-01-25 10:32:57 CST

19542080845 From: Ranae McGraw

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Delaware ______ In order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: LENSAR, INC,

2. The principal office address: 2800 DISCOVERY DRIVE, SUITE 100, ORLANDO, FL 32826

3. The mailing address (if different): 2800 DISCOVERY DRIVE, SUITE 100, ORLANDO, FL 32826

4. Date of incorporation/qualification: 9/17/2004

Document number: F04000005318

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

CURTIS, NICHOLAS T

2800 DISCOVERY DRIVE, SUITE 100, ORLANDO, FL 32826

6. The name and street address of the new registered agent (if changed) and /or registered offices (if changed):

C T Corporation System c/o C T Corporation System, 1200 South Pine Island Road P.O. Box NOT acceptable Plantation, Florida 33324 Plantation State St

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Jamila Woods, Secretary Printed or typed name and title

Date

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Βv

1/24/2017

If signing on behalf of an entity: Kristin Bolden Assistant Secretary Typed or Printed Name

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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To: