

F090000003144

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

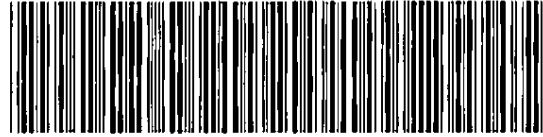
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

2018 JAN 10 AM 9:15
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

FILED

Alamie chg

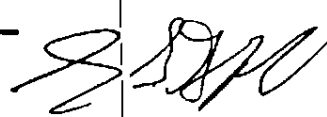
JAN 11 2018
ALBRITTON

CT Corp.

3458 Lakeshore Drive, Tallahassee, FL 32312
850-656-4724

Date: 1/10/2018

Acc#I20160000072



Name:	Toshiba Medical Research Institute USA, Inc.
Document #:	
Order #:	10780584

Certified Copy of Arts & Amend:	<input type="checkbox"/>			
Plain Copy:	<input type="checkbox"/>			
Certificate of Good Standing:	<input type="checkbox"/>			
	<input type="checkbox"/>			
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:		
		Number of Certs:		

18 JAN 10 AM 4:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing:	Certified:
	Plain:
	COGS:

This is a 1 - 2 filing.
The Reinstatement accompanied this filing and a copy is attached for your reference.

Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ 43.75

Please call if you have questions about this amount.

Thank you!

COVER LETTER

TO: Amendment Section
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:

Name of Contact Person at (_____) Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$35.00 Filing Fee

\$43.75 Filing Fee & Certificate of Status

\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)

\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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.)

SECTION I
(1-3 MUST BE COMPLETED)

F09000003144

(Document number of corporation (if known))

1. Toshiba Medical Research Institute USA Inc.

(Name of corporation as it appears on the records of the Department of State)

2. Delaware

(Incorporated under laws of)

3. 08/06/2009

(Date authorized to do business in Florida)

FILED
2018 JAN 10 AM 9:15
TALLAHASSEE, FLORIDA

SECTION II
(4-7 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? 01/04/2018

5. Canon Medical Research USA, Inc.

(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. 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 a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

John Patterson

(Typed or printed name of person signing)

Senior Vice President and Controller

(Title of person signing)

Delaware

The First State

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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.



4156395 8320
SR# 20177687753

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line.

Jeffrey W. Bullock, Secretary of State

Authentication: 203799998

Date: 12-20-17