Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations
Fax Number : (850) 617-6386 OF SUDMISSION 11123

From:
Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023
Phone : (850)222-1092

Phone : (850)222-1092 Fax Number : (850)878-5368

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

annual report mailings. Enter only one email address please

COR AMND/RESTATE/CORRECT OR O/D RESIGN 35810 CORP.

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12/2/2011

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November 29, 2011

FLORIDA DEPARTMENT OF STATE
Division of Corporations

35810 CORPORATION P. O. BOX 367809 BONITA SPRINGS, FL 34136

SUBJECT: 35810 CORPORATION

REF: F10000004380

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

SECTION #3 OF THE APPLICATION LISTING THE DATE AUTHORIZED TO DO BUSINESS IN FLORIDA HAS AN INCORRECT DATE LISTED. PLEASE CORRECT YOUR DOCUMENT WITH THE FOLLOWING DATE: 09/29/2010

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) 245-6906.

Darlene Connell Regulatory Specialist II FAX Aud. #: H11000277338 Letter Number: 811A00026666

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APPRINSE FLORIDA

APPRINSE FLORIDA

RE-SUBMIT
Please retain original filing
date of submission _______

P.O BOX 6327 - Tallahassee, Florida 32314

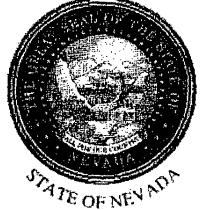
PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

| | | (1-3 MUST BE COMPLE | i eu) | |
|---|---|--|---|--|
| • | | 1210000011102 | | |
| | (Docu | ment number of corporation | (if known) | · |
| 1 | | 35810 Corporation | | |
| | (Name of corporation | as it appears on the records | of the Department of State) | |
| 2 | Nevada | 3 | 9/29/2 | leio |
| | (Incorporated under laws of) | | (Date authorized to do ousiness | in Florida) |
| | (4-7 COMPI | SECTION II LETE ONLY THE APPLIC | ABLE CHANGES) | |
| 4. If the amend | ment changes the name of the | e corporation, when was | s the change effected under t | he laws of |
| its jurisdictio | on of incorporation? | 11/03/2010 | | |
| 5 | | Zylomed Inc. | | |
| (Name of cor appropriate | rporation after the amendmen abbreviation, if not containe | nt, adding suffix "corpored in new name of the co | ration," "company," or "inco prporation) | orporated," or |
| | | Zylomed Corporation | | |
| (If new name business in l | is unavailable in Florida, en Florida) | er alternate corporate n | ame adopted for the purpose | of transacting |
| 6. If the amend | ment changes the period of d | uration, indicate new pe | priod of duration. | NOV 23 |
| | | (New duration) | | 湖北 河 |
| 7. If the amend | ment changes the jurisdiction | of incorporation, indic | ate new jurisdiction. | or sa |
| | | (New jurisdiction) | | |
| B. Attached is a 90 days prior having custo | certificate or document of si to delivery of the application dy of corporate records in the | milar import, evidencing to the Department of States and the interest of the i | g the amendment, authentice slate, by the Secretary of Sta aws of which it is incorporate | ited not thore than te or other official ed. |
| (Signote | The W. Andul | officer - if in the hands | - | |
| of a fee | Miver or other court appointed fidu | ciary, by that fiduciary) | | |
| | Jeffrey M. Goodrich ped or printed name of person sign | nine) | Secretary and Treasurer (Title of person signing) | |
| (1) | han as business marine as beignit sign | 6/ | (Time of herson signing) | |

SECRETARY OF STATE



I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, limited-liability partnerships, and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that there was filed in this office on November 3, 2010

ARTICLES OF MERGER
merging
ZYLOMED ACQUISITION COMPANY
(A DELAWARE CORPORATION)
into
35810 CORPORATION
(A NEVADA CORPORATION)
Changing name to
ZYLOMED INC.



Certified By: Joann Larson
Certificate Number: C20111122-1263
You may verify this certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Scal of State, at my office on November 22, 2011.

ROSS MILLER Secretary of State