

F100000005271

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(City/State/Zip/Phone #)

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10 DEC -9 AM 11:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Roberts DEC 13 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Lasertec, Inc.

Name of Corporation

DOCUMENT NUMBER: F10000005271

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Donn Schulte

Name of Contact Person

Lasertec, Inc

Firm/Company

9130 Galeria Ct., Suite 319

Address

Naples, FL 34109

City/State and Zip Code

dschulte@lasertecinc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Donn Schulte

Name of Contact Person

at (239) 566-8900

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

☒ \$52.50 Filing Fee, Certificate of Status & Certified Copy

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

ARTICLES OF CORRECTION

for

Lasertec, Inc.

Name of Corporation as currently filed with the Florida Dept. of State

F10000005271

Document Number (if known)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation files these Articles of Correction within 30 days of the file date of the document being corrected.

These articles of correction correct Application of Foreign Corporation,
(Document Type Being Corrected)


filed with the Department of State on 12/2/10,
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

The Principal Address was incorrectly listed as: 500 Woodward Avenue, Suite 2500
Detroit, MI 48226

Correct the inaccuracy, incorrect statement, or defect:

The Principal Address should be: 9130 Galleria Ct., Suite 319, Naples, FL 34109


(Signature of a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Donn Schulte

(Typed or printed name of person signing)

Director

(Title of person signing)

Filing Fee: \$35.00