

19542-60845 m. Nanae McGraw

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6383

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.

Email Address:

FOREIGN PROFIT/NONPROFIT CORPORATION
OCULAR THERAPEUTIX, INC.

Certificate of Status	0
Certified Copy	0
Page Count	07
Estimated Charge	\$70.00

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Corporate Filing Menu

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K. SALY

DEC - 8 2016

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ocular Therapeutix, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Debora Cokbilen

Name of Person

National Registered Agents, Inc.

Firm/Company

900 Merchant's Concourse, Suite 405

Address

Westbury, NY 11590

City/State and Zip code

ct-statecommunications@wolterskluwer.com

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

For further information concerning this matter, please call:

Debora Cokbilen

at (888)

579-0286

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Ocular Therapeutix, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Delaware 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 09/12/2016 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 34 Crosby Drive, Ste. 105, Bedford, MA 01730
(Principal office address)
- _____
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

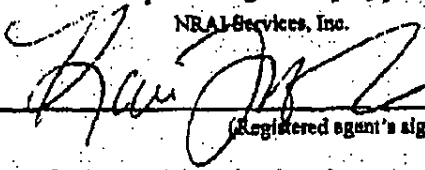
Name: NRAI Services, Inc.

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(City) (Zip code)

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 obligations of my position as registered agent.

By: 
(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Please see Exhibit A (attached)Address: for respective directors

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Please see Exhibit B (attached)Address: for respective officers

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. W. Bradford Smith

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.135, F.S.

13. W. Bradford Smith Chief Financial Officer

(Typed or printed name and capacity of person signing application)

**EXHIBIT A****OCULAR THERAPEUTIX, INC.
BOARD MEMBER LISTING**

Board of Directors	Members Name	Address
Director	Bruce Peacock	c/o Ocular Therapeutix, Inc. 34 Crosby Drive, Suite 105 Bedford, MA 01730
Director	James Garvey	c/o Ocular Therapeutix, Inc. 34 Crosby Drive, Suite 105 Bedford, MA 01730
Director	Charles Warden	c/o Ocular Therapeutix, Inc. 34 Crosby Drive, Suite 105 Bedford, MA 01730
Director	Richard Lindstrom, MD	c/o Ocular Therapeutix, Inc. 34 Crosby Drive, Suite 105 Bedford, MA 01730
Director	Jaswinder Chadha	c/o Ocular Therapeutix, Inc. 34 Crosby Drive, Suite 105 Bedford, MA 01730
Director	Jeffrey S. Heler, MD	c/o Ocular Therapeutix, Inc. 34 Crosby Drive, Suite 105 Bedford, MA 01730
Director	W. James O'Shea	c/o Ocular Therapeutix, Inc. 34 Crosby Drive, Suite 105 Bedford, MA 01730
Chairman (note also President & CEO of the Ocular Therapeutix, Inc.)	Amarpreet Sawhney, Ph.D.	c/o Ocular Therapeutix, Inc. 34 Crosby Drive, Suite 105 Bedford, MA 01730

**EXHIBIT B****OCULAR THERAPEUTIX, INC.
OFFICERS OF THE COMPANY**

Title(s) of Officer:	Name	Address
President & CEO (also serves on the Board of Directors)	Amarpreet Sawhney, Ph.D.	C/o Ocular Therapeutix, Inc. 34 Crosby Drive, Suite 105 Bedford, MA 01730
Chief Financial Officer, Treasurer & Assistant Secretary	W. Bradford Smith	C/o Ocular Therapeutix, Inc. 34 Crosby Drive, Suite 105 Bedford, MA 01730
Chief Commercial Officer	C. Andrew Hurley	C/o Ocular Therapeutix, Inc. 34 Crosby Drive, Suite 105 Bedford, MA 01730
Chief Operating Officer	James Fortune	c/o Ocular Therapeutix, Inc. 34 Crosby Drive, Suite 105 Bedford, MA 01730
Chief Medical Officer	Jonathan Talamo	c/o Ocular Therapeutix, Inc. 34 Crosby Drive, Suite 105 Bedford, MA 01730
Executive Vice President, Regulatory, Quality & Compliance	Eric Ankerud	c/o Ocular Therapeutix, Inc. 34 Crosby Drive, Suite 105 Bedford, MA 01730
Secretary	Steve Cagnetta	c/o Ocular Therapeutix, Inc. 34 Crosby Drive, Suite 105 Bedford, MA 01730

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OCULAR THERAPEUTIX, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTEENTH DAY OF OCTOBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OCULAR THERAPEUTIX, INC." WAS INCORPORATED ON THE TWELFTH DAY OF SEPTEMBER, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

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

Jeffrey W. Bullock
Jeffrey W. Bullock, Secretary of State

Authentication: 203176552

Date: 10-18-16