2006 FOR PROFIT CORPORATION REINSTATEMENT

SIGNATURE:

DOCUMENT # F93000005715 1. Entity Name CANDELA LASER CORPORATION LLOND TANY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 530 BOSTON POST RD. 530 BOSTON POST RD. WAYLAND, MA 01778-1886 WAYLAND, MA 01778-1886 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 10132006 REIN-P City & State City & State 4. FEI Number Applied For 04-2477008 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND RD. PLANTATION, FL 33324 City Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. 300081352353 10/31/06--01016--008 <u>**150.00</u> SIGNATURE_ Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the After January 1, 2007, Fee will be \$300.00 corporation did not receive the prior notice. OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Director TV Addition TITLE ☐ Delete TITLE ☐ Change Scott, Douglas W. 530 Boston Aust Road BROYER, F PAUL NAME NAME STREET ADDRESS 530 BOSTON POST RD. STREET ADDRESS KCCIO PM, brelvew CITY-ST-ZIP WAYLAND, MA 01778 CITY-ST-7IP Director TITLE Delete TITLE ☐ Change Addition Abe, George A. 530 Boston Post Road ROBERTS, QUINN E NAME NAME STREET ADDRESS 530 BOSTON POST RD STREET ADDRESS Wayland, MA 01778 WAYLAND, MA 01778 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition Bailey, Gen III 530 Boston Post Road NAME PUORRO, GERARD NAME STREET ADDRESS 530 BOSTON POST ROAD STREET ADDRESS CITY-ST-ZIP WAYLAND, MA 01778 CITY-ST-ZIP Wayland, MA 01778 Director Delete Addition TITLE Change Nager, Nancy 530 Boston Post Road NAME WILBER, ROBERT NAME 530 BOSTON POST RD STREET ADDRESS STREET ADDRESS Wayland, MA 01778 Vice Dresident CITY-ST-ZIP WAYLAND, MA 01778 CITY-ST-ZIP Addition ☐ Delete TITLE ☐ Change TITLE Luckhese, Paul R. 530 Boston Post Road MCGRAIL WILLIAM NAME NAME 530 BOSTON POST RD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WAYLAND, MA 01778 CITY-ST-ZIP Wayland, Vice Resident Vice ☐ Change Addition TITLE ☐ Delete TITLE Heman, Dennis S. 530 Beston Dost Road NAME ROBERTS, KENNETH 530 BOSTON POST ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WAYLAND, MA 01778 CITY-ST-ZIP wayland MA OITTS 12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with as address, with all other like empowered.

TO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

2006 FOR PROFIT CORPORATION REINSTATEMENT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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REINSTATEMENT									
DOCUMENT # F93000005715 1. Entity Name CANDELA LASER CORPORATION									
Principal Place of Business 530 BOSTON POST RD. WAYLAND, MA 01778-1886		Mailing Address 530 BOSTON POST RD. WAYLAND, MA 01778-1886		i issiiga ma	ibida likil boki bolik b			1981 M 4861	
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		10132006	REIN-P	CR2E098	(11/05)		
City & State		City & State			4. FEI Numbe 04-247				plied For t Applicable
Zip	Country	Zip	Country		5. Certificate	of Status Desired		.75 Add Required	
Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
1200 S. PI	ORATION SYSTEM NE ISLAND RD. ON, FL 33324		Stre		² .O. Box Numbe	r is Not Acceptat	ole)		
			City	·			FL	Zip Code	<u></u>
	named entity submits this statement for ions of registered agent.	or the purpose of changing its	registered offi	ce or register	ed agent, or bot	h, in the State of I	Florida. I am fam	iliar with,	and accept
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE	: Registered Agen	t signature requir	ed when reinstating)		DATE		
FILE NOW!!! FEE IS \$150.00 After January 1, 2007, Fee will be \$300.00						In accordance corporation di	with s. 607.19 d not receive th	— 3(2)(b), se prior r	F.S., the notice.
10.	OFFICERS AND	DIRECTORS	11.				FICERS AND DI	RECTORS	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TV BROYER, F PAUL 530 BOSTON POST RD. WAYLAND, MA 01778	☐ Delete	TITLE NAME STREET ADDA CITY-ST-ZIP	ESS Sio	Presiden Same Boston Cos MAND, N] Change	Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MCGRAIL, WILLIAM 530 BOSTON POST RD. WAYLAND, MA 01778	☐ Delele	TITLE NAME STREET ADDR CITY-ST-ZIP	1] Change	☐ Addition
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indicated of the cor	certify that the information supplied wit I on this report or supplemental report i rporation or the receiver or trustee emp , or on an attachment with an address,	is true and accurate and that no powered to execute this report	ny signature si as required by	hall have the s	same legal effec	t as if made unde	er oath, that I am a	an officer	or director