11/23/2015 2:55:46 PM From: Division of Corporations

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Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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From:

Account Name : C T CORPORATION SYSTEM

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DISSOLUTION OR WITHDRAWAL UNILENS CONTACT LENS LABORATORY, INC.

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COVER LETTER

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Tallahassee, FL 32301

TO: Amendment Sec	tion			_
Division of Corp	orations			
SUBJECT: Unilens Contact	Lens Laboratory, Inc.			の記録が
DOCUMENT NUMBER	K73354			
The enclosed Articles of I	Dissolution and fee ar	e submitted for filin	g.	
Please return all correspon	dence concerning this	matter to the follow	ving:	
Pam Lewis				
	(Name of Cont	act Person)		
Valeant Pharmaceuticals Intern	ational			
	(Firm/Co	mpany)		
50 Technology Drive				
	(Addres	3)		
Irvine, CA 92618				
	(City/State an	d Zip Code)		
For further information con	ncerning this matter, p	please call:		
Pam Lewis		at (
(Name of Conta	ct Person)	(Area Code)	(Daytime Telephone Number	r)
Enclosed is a check for the	following amount:			
□ \$35 Filing Fee □ \$43.: Certif	ficate of Status Co (A	43.75 Filing Fee & ertified Copy dditional copy is nclosed)		
MAILING ADDRE Amendment Sectio Division of Corpor P.O. Box 6327 Tallahassee, FL 32	n rations	Ame Divi Clift	EET ADDRESS: ndment Section sion of Corporations on Building Executive Center Circle	

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State: Unilens Contact Lens Laboratory, Inc.						
SECOND:	The document number of the corporation (if known):						
THIRD:	The date dissolution was authorized: November 13, 2015						
	Effective date of dissolution <u>if applicable:</u> (no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.						
FOURTH:	Adoption of Dissolution (CHECK ONE)						
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.						
	Dissolution was approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve: The number of votes cast for dissolution was sufficient for approval by						
							(voling group)
							Signature: (By a director, president or other offices, if directors or officers have not been selected, by an incorparator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
	Robert R. Chai-Onn						
	(Typed or printed name of person signing)						
	Secretary						
	(Title of person signing)						