P15000037368

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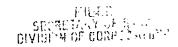
15 AUG 28 AM 9: 22

Tallahassee, FL 32301

COVER LETTER

TO: Amendment Section
Division of Corporations

Division of Corpo						
NAME OF CORPOR	ATION: A.O. LASE	R DEVICES, INC				
DOCUMENT NUMB	D4500002726					
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.				
Please return all corresp	ondence concerning this ma	tter to the following:				
	C	CHARLES FISCH	IER			
-	Name of Contact Person					
	A.U.	LASER DEVICE	.S, INC.			
	Firm/ Company 250 EAST DRIVE, SUITE B					
-						
	Address MELBOURNE, FL 32904					
-	City/ State and Zip Code					
	CFISCHER	R@A-OPTOWAV	E.COM			
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	concerning this matter, pleas	se call:				
WILLIAM PAT	RICK SHANNONH	HOUSE at (321	626-0564			
	f Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:			
S35 Filing Fee	X\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
	ing Address		Address			
	idment Section ion of Corporations		ment Section			
	Box 6327		on of Corporations Building			
Tallahassee, FL 32314			xecutive Center Circle			



Articles of Amendment to Articles of Incorporation

15 AUG 28 AM 9: 22

AO LASER DEVICE	5, INC.
	tly filed with the Florida Dept. of State)
P150000	37368
	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address Name of New Registered Agent NAME.	dress in Florida, enter the name of the
(Florida s	street address)
New Rogistered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent thereby accept the appointment as registered agent. I am familian	

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CEO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change. Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change. Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: XChange	PT	John Doe		
X Remove	$\underline{\mathbf{v}}$	Mike Jones		
X Add	<u>\$V</u>	Sally Smith		
Type of Action (Check One)	Title	Name	Address	
1) Change	D	CHARLES FISCHER	105 COMAC STREET	
X Add			RONKONKOMA, NY 11779	
Remove				
2) Change			Market Market and Control of the Con	
Add				
Remove				
3) Change				
Add			***************************************	
Remove				
4) Change		-		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change	******			
Add				
Remove				

Altach <i>addition</i>	adding additional Ar	ucies, enter enunge . (Be specific)	151 11614		
N/n					
TV/H	<u>,</u>	· · · · · · · · · · · · · · · · · · ·			
					
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<u></u>					······································
f an amendme	nt provides for an ex- implementing the an	change, reclassifica	tion, or cancellat	ion of issued shar	<u>es</u>
(if not ap	licable, indicate N/A)	tentament if not co.	HADICO IN THE WILL	thanten total	
N/A					
					······································
					
		, , , , , , , , , , , , , , , , , , ,			

	28/21/	2015 DIVISION OF CONGRESSION IF Other than the 15 AUG 28 AM 9: 22
The date of each amendment(s) addate this document was signed.	loption:	if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days	after amendment file date)
Note: If the date inserted in this be document's effective date on the De		tatutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su		er of votes cast for the amendment(s)
	roved by the shareholders through vo each voting group entitled to vote se	oring groups. The following statement parately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were suffic	cient for approval
by	(voting group)	, **
•	(voling group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors withou	rt shareholder action and shareholder
action was not required.	pted by the incorporators without sha	reholder action and shareholder
Dated	8/21/2015 Ast	
Signature	13	
selected	irector, president or other officer — if if, by an incorporator — if in the hands ted fiduciary by that fiduciary)	
•	D	AN HOU
•	(Typed or printed name o	f person signing)
	PF	RESIDENT
•	(Title of perso	on signing)