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Division of Corporations

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COVER LETTER

dment Section on of Corporations	
nilens Corp. USA	
Name of Corp	poration
r number:	
Statement of Change of Registered Office/A	Agent and fee are submitted for filing.
all correspondence concerning this matter to	the following:
Pam Lewis	
Name of Conta	ct Person
Valeant Pharmaceuticals International	
Firm/Com	pany
50 Techology Drive	
Addres	S
Irvine, CA 92618	
City/State and	Zip Code
pamela lewis@valeant.com	
E-mail address: (to be used for futu	re annual report notification)
formation concerning this matter, please cal	l:
•	949 398-5773
Name of Contact Person	at () 398-5773 Area Code & Daytime Telephone Number
\$35.00 check made payable to the Departme	ent of State.
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
	Name of Corporations Name of Corporations P23142 F NUMBER: Statement of Change of Registered Office// all correspondence concerning this matter to Pam Lewis Name of Conta Valeant Pharmaceuticals international Firm/Com 50 Technology Drive Addres Irvine, CA 92618 City/State and pamela.lewis@valeant.com E-mail address: (to be used for future formation concerning this matter, please called the concerning this matter.

CR2E045 (03/12)

::

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this cange is submitted for a corporation organized under the laws of the State of Delaware	_	
	er to change its registered office or registered agent, or both, in the State of Florida. Unitens Com. USA		
	the corporation: Unitens Corp. USA office address: 10431 72nd Street North, Largo, FL 33777		<u> </u>
3. The mailing a	address (if different): 400 Somerset Corporate Blvd., Bridgewater, NJ 08807		
4. Date of incor	poration/qualification; 02/24/1989 Document number: P23142		
5. The name and	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)		
	Leonard Barker		
	10431 72nd Street North		
	Largo, FL 33777		
6. The name and (if changed):	d street address of the new registered agent (if changed) and for registered officers.	2118 NOV 12	
	c/o C T Corporation System, 1200 South Pine Island Road	-	-
	P.O. Box NOT accretable		į.
	Plantation, Florida 33324	E E	
	ess of its registered office and the street address of the business office of its registered age be identical.	သူ့ ဆိ 0	
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so ne board, or the corporation has been notified in writing of the change. Robert R. Chal-Onn, Secretary		
i , — .	ne of all afficer or greener and title	-	
I hereby accept I further agree performance of agent. Or, if the hereby confirm	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete my dulies, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.		
CTC/By:		_	
,	fature of Registered Agent Date		
If signing on be	half of an entity:		
TRISTA	WENRICH Syped or Printed Name		
	* * * FILING FEE: \$35.00 * * *	-	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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