

A99000002099

Gregory D. Hartman
Requestor's Name

P.O. Box 587
Address

Warsaw, IN 46581-0587
City/State/Zip Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. EBI LP
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name)
4. _____
(Corporation Name)

000002911100--2
-06/21/99--01138--017
*****61.25 *****61.25

W99-14702

.0
Daytime Telephone Number)

☐ Walk in

☐ Pick up time

☐ Mail out

☐ Will wait

☐ FILING ADDRESS: 000002911100--2
-12/14/99--01048--005
*****26.25 *****26.25

NEW FILINGS	
☐	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS Section	
☐	Amendment
☐	Resignation of R.A., Officer/ Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/ QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

FILED
99 DEC 14 PM 2:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

with
12/15



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

June 25, 1999

GREGORY D. HARTMAN
BIOMET, INC.
PO BOX 587
WARSAW, IN 46581-0587

SUBJECT: EBI, L.P.
Ref. Number: W99000014702

We have received your document for EBI, L.P. and your check(s) totaling \$611.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability partnership must have an active registration/filing on file with this office before this filing will be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

The new name designated in your document is unavailable. A foreign limited partnership whose name is not available in Florida must adopt an alternate name which contains the word "Limited" or its abbreviation "Ltd." for use in the State of Florida. Please amend your document to include the alternate name the limited partnership will use in Florida.

If you have any further questions regarding the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays
Document Specialist

Letter Number: 499A00033577

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1. EBI, L.P.
(Name of limited partnership as it is in the home state)
2. _____
(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida; must contain the word "LIMITED" or "LTD.")
3. INDIANA 4. 5-24-99
(State of Formation) (Date of Formation)
5. CT CORPORATION SYSTEM
(Name of Registered Agent for Service of Process)
6. 1200 SOUTH PINE ISLAND ROAD
(Street Address of Registered Office)
- PLANTATION, Florida 33324
(City) (Zip Code)
7. Acceptance by the Registered Agent for Service of Process:
SEE ATTACHMENT
(Agent must sign on this line)
8. PO Box 587
WARSAW IN 46581-0587
(Address of registered office required in state of formation or, if not required, address of principal office.)
9. NAMES OF GENERAL PARTNERS STREET ADDRESS
- EBI HOLDINGS, INC. 100 INTERPACE PKWY, PARLIPPANT, NJ 07054
F99-6475
10. PO Box 587, WARSAW IN 46581-0587
(Office where Names, Addresses and Contributions of Limited Partners are kept.)
11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.

CONTINUED

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12. 100 INTERPALE PKWYPARLIPPANY, NJ 07054

(Mailing Address of Limited Partnership)

Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 1ST day of JUNE, 19 99

Gregory D. Hartman Asst Treasurer, EBI Holdings Inc.
General Partner

STATE OF INDIANACOUNTY OF KOSCIUSKO

On this 1st day of June, 19 99

Gregory D. Hartman personally appeared before me.

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Susan A. Alexander
(Notary Public Signature)

Susan A. Alexander

(Notary's Printed Name)

Seal

My Commission Expires: May 10, 2008
County of Residence: Kosciusko

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared GREGORY D HARTMAN, ASST TREASURER, EBI HOLDINGS, INC
 a general partner of EBI, L.P., (an) INDIANA
 limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 990.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ NONE.

Under the penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 1ST day of JUNE, 19 99.

Gregory D Hartman Asst Treasurer, EBI Holdings Inc
 General Partner

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FILED

STATE OF INDIANA

COUNTY OF KOSCIUSKO

On this 1st day of June, 19 99,

Gregory D. Hartman, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

Susan A Alexander
 (Notary Public Signature)

Susan A. Alexander

(Notary's Printed Name)

Seal

My Commission Expires: May 10, 2008
 County of Residence: Kosciusko