

70600006118

Division of Corporations

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 SEP 22 PM 12:54

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000234622 3)))



H060002346223ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850) 205-0381

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5926

FOREIGN PROFIT/NONPROFIT CORPORATION

CVRx, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 SEP 22 PM 12:54

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. CVRx, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Delaware 3. 41-1983744
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 8/17/00 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 10900 73rd Ave. N., Suite 116, Maple Grove, MN 55369
(Principal office address)
10900 73rd Ave. N., Suite 116, Maple Grove, MN 55369
(Current mailing address)
8. Medical technology
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and direct address of Florida registered agent: (P.O. Box NOT acceptable)
Name: CT Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(City) (Zip code)
10. Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

By: Michele Miller
(Registered agent's signature) **Michele Miller**
Assistant Secretary
11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.
12. Names and business addresses of officers and/or directors:

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 SEP 22 PM 12: 54

A. DIRECTORS

Chairman: See attached.

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: See attached.

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Director or Officer listed in number 12 of the application)

14. Robert Kieval, President and Chief Executive Officer
(Typed or printed name and capacity of person signing application)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 SEP 22 PM 12: 54

**Attachment to Florida Application for Registration
of a Foreign For-Profit Corporation
of
CVRx, Inc.**

12. Name and business address of officers and/or directors:

A. Directors:

<u>Name:</u>	<u>Address:</u>
Buzz Benson	10900 73 rd Ave. N. Suite 116, Maple Grove, MN 55369
A. Jay Graf	10900 73 rd Ave. N. Suite 116, Maple Grove, MN 55369
Robert S. Kieval	10900 73 rd Ave. N. Suite 116, Maple Grove, MN 55369
John Nehra	10900 73 rd Ave. N. Suite 116, Maple Grove, MN 55369
Michael Selzer	10900 73 rd Ave. N. Suite 116, Maple Grove, MN 55369
James Shapiro	10900 73 rd Ave. N. Suite 116, Maple Grove, MN 55369
Dale Spencer	10900 73 rd Ave. N. Suite 116, Maple Grove, MN 55369
Michael B. Sweeney	10900 73 rd Ave. N. Suite 116, Maple Grove, MN 55369

B. Officers:

Robert S. Kieval
President and Chief Executive Officer
10900 73rd Ave. N. Suite 116, Maple Grove, MN 55369

John Brintnall
Vice President of Finance and Secretary
10900 73rd Ave. N. Suite 116, Maple Grove, MN 55369

Robert Cody
Vice President of Medical Affairs
10900 73rd Ave. N. Suite 116, Maple Grove, MN 55369

Dean Bruhn-Ding
Vice President of Regulatory Affairs and Quality
10900 73rd Ave. N. Suite 116, Maple Grove, MN 55369

Martin Rossing
Vice President of Research and Development
10900 73rd Ave. N. Suite 116, Maple Grove, MN 55369

000000000000000000

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 SEP 22 PM 12:54

Delaware

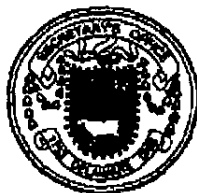
PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CVRX, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF SEPTEMBER, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.



3265491 8300

060871917

Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5059037

DATE: 09-21-06