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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : 120000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1515

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION
ISOTIS ORTHOBIOLOGICS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

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DIVISION OF CORPORATIONS

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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. IsoTis OrthoBiologics, Inc.

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

Integra Pain Management

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Washington

(State or country under the law of which it is incorporated)

3. 911643963

(FEI number, if applicable)

4. June 17, 1994

(Date of incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. N/A

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 2 Goodyear, Irvine, CA 92618

(Principal office address)

311 Enterprise Drive, Plainsboro, NJ 08536

(Current mailing address)

8. sales of surgical & medical equipment

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee

(City)

, Florida 32301

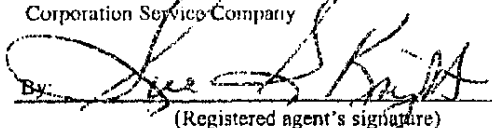
(Zip code)

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.

Corporation Service Company

Sue G. Knight
as its agent

By: 

(Registered agent's signature)

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.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Stuart Essig

Address: 311 Enterprise Drive, Plainsboro, NJ 08536

Vice Chairman: John B. Henneman, III

Address: 311 Enterprise Drive, Plainsboro, NJ 08536

Director: Gerard S. Cariozzi

Address: 311 Enterprise Drive, Plainsboro, NJ 08536

Director: _____

Address: _____

B. OFFICERS

President: Stuart Essig

Address: 311 Enterprise Drive, Plainsboro, NJ 08536

Vice President: John B. Henneman, III

Address: 311 Enterprise Drive, Plainsboro, NJ 08536

311 Enterprise Drive, Plainsboro, NJ 08536

Secretary: Kathryn Lamping

Address: 311 Enterprise Drive, Plainsboro, NJ 08536

Treasurer: Nora Brennan

Address: 311 Enterprise Drive, Plainsboro, NJ 08536

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

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

14. Kathryn Lamping, Assistant Corporate Secretary
(Typed or printed name and capacity of person signing application)

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UNITED STATES OF AMERICA

The State of Washington

Secretary of State

I, SAM REED, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION
OF
ISOTIS ORTHOBIOLOGICS, INC.

I FURTHER CERTIFY that the records on file in this office show that the above named Profit Corporation was formed under the laws of the State of WA and was issued a Certificate Of Incorporation in Washington on 6/17/1994.

I FURTHER CERTIFY that as of the date of this certificate, ISOTIS ORTHOBIOLOGICS, INC. remains active and has complied with the filing requirements of this office.

Date: June 9, 2010

UBI: 601-553-620



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Sam Reed, Secretary of State

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