Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850) 222-1092° Phone

Fax Number : (850)878-5368

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 Sybron Canada Holdings, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help T. Burch AUG 1 6 2012

8/15/2012

CT CORPORATION

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https://efile.sunbiz.org/scripts/efilcovr.exe

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COVER LETTER

TO:	New Filing Sec Division of Co			
SUBJ	ECT:	Sybr	on Cunada Holdings, Inc.	
	,	Name of corpora	ntion - must include suffix	
Dear S	Sir or Madam:		•	
"Certi	ficate of Existent	tion by Foreign Corporation ce," or "Certificate of Good gn corporation to transact bu	for Authorization to Transac Standing" and check are subr siness in Florida.	t Business in Florida," nitted to register the
Pleasc	return all corres	pondence concerning this ma	atter to the following:	
		CT Corporat	tion (Tallahassee)	
		Name	e of Person	
		Firm/	Company	
		A	ddress	
		City/Str	ate and Zip code	
		Tammy, Manning	g@sybrondental.com	
		E-mail address: (to be us	sed for future annual report n	otification)
For fu	rther information	concerning this matter, ples	ase call:	•
		at (•)	
	Name of Perso	on A	rea Code & Daytime Telepho	one Number
	New Filing Sec Division of Co Clifton Buildin	rporations 08 6 Center Circl e	MAILING AI New Filing Se Division of Co P.O. Box 6327 Tallahassee, Fi	ction rporations
Enclos	_	the following amount:		
	70.00 Filing Fee	_ .	S78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy

FL619 - 03/03/2011 CT Piling Mustger Online

APPLICA		ATION FOR AUTHORIZATION TO TR SS IN FLORIDA	ANGACT
		A STATUTES, THE FOLLOWING IS SUBMITT T BUSINESS IN THE STATE OF FLORIDA.	ED FO
1. Sybron Canada	Holdings, Inc.		
	corporation; must include "INCORPORATI Corp," "Inc," "Co," or "Corp.")	ed," "Company," "Corporation,"	
(If name unavail	lable in Florida, enter alternate corporate na	me adopted for the purpose of transacting business i	n Florida)
2. Delaware		3, 33-0976497	
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)	
4. 06/27/2001		5. Perpetual	
	of incorporation)	(Duration: Year corp. will cease to exist or "po	srpetual")
6. Upon Qualifica	tion		
7, 1717 West Collin	ns Avenue, Orange, CA 92867 (Principal office	7.1502, F.S., to determine penalty liability) address)	
20110	(Current mailing	address)	
8. Holding compa	ny		
		r country to be carried out in state of Florida)	
9. Name and stre	et address of Florida registered agent: (P.O. Box NOT acceptable)	
Name:	C T Corporation System		
Office Address:	1200 South Pine Island Road .	·	
	Plantation	, Florida <u>33324</u>	
	(City)	(Zip code)	
Having been nan designated in this	application, I hereby accept the appoi	rvice of process for the above stated corporation ntment as registered agent and agree to act in A relative to the proper and complete performa	this capacity.

and I am familiar with and accept the obligations of my position as registered agent.

C T Corporation System Kristin Bolden Assistant Secretary 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.

FL019 - 03/03/2011 C T Filing Manager Cintina

A. DIRECTORS Chairman: SEE ATTACHMENT Address:			2 AUG 15 PH 4:	
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/ice Chairman:			••	
Address:		<u> </u>	យា	_
Director				_
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OTE: If necessary, you may attach an addendum to the application listing additional additional actions are application and additional additional actions are application and addendum to the application listing additional actions are application and addendum to the application listing additional actions are application and addendum to the application listing additional actions are application and addendum to the application and addendum to the application and additional actions are application and additional actions are addendum to the application and additional actions are added and additional actions are additional actions.	oum othicals budiol	airectors.		
Signature of Director or Officer				<u>-</u>
he officer or director signing this document (and who is listed in number 12 above to true and that he optic is aware that false information submitted in a document third degree felops as provided for in s.817.155, F.S.	e) affirms that the fa to the Department of	cts stated he State const	erein itutos :	æ
1. Jason Davis, Vice President (Typed or printed name and capacity of person signing app				_

FL919 - QV\$3/2011 C Y Filing Name or Caline

Sybron Canada Holdings, Inc.

Officers

Robert S. Lutz - President 1717 W. Collins Ave., Orange CA 92867 Frank T. McFaden - VP & Treasurer 1717 W. Collins Ave., Orange CA 92867 Laurence Smith - VP 1717 W. Collius Ave., Orange CA 92867 Jason Davis - VP 1717 W. Collins Ave., Orange CA 92867 James F. O'Reilly - VP & Secretary 1717 W. Collins Ave., Orange CA 92867 Charles Schwertner - Asst. Treasurer & Asst. Secretary 1717 W. Collins Ave., Orange CA 92867

Directors

Robert S. Lutz 1717 W. Collins Ave., Orange CA 92867 Frank T. McFaden 1717 W. Collins Ave., Orange CA 92867

Delaware

PAGE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "SYBRON CANADA HOLDINGS, 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 FOURTEENTH DAY OF
AUGUST, A.D. 2012.

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.

SECRETARIO SIATE
SECRETARIO SIATE
TALLARIASSE DE LE LOS

3408494 8300

120936705

You may verify this certificate culine at corp. delaware, gov/authver, showl

AUTHENTY CATION: 9780548

DATE: 08-14-12