

Division of Corporations

**F1700004566**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (350) 617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (512) 418-6949  
Fax Number : (954) 203-0845

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

Email Address: \_\_\_\_\_

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**FOREIGN PROFIT/NONPROFIT CORPORATION  
CARDIOVASCULAR SYSTEMS, INC.**

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

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OCT 12 2017  
J. HARRIS

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Cardiovascular Systems, Inc.  
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Jeff Points

Name of Person

Cardiovascular Systems, Inc.

Firm/Company

1225 Old Hwy 8 NW

Address

St. Paul, MN 55112

City/State and Zip code

jpoints@csi360.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jeff Points at ( 651 ) 259-1635  
Name of Person Area Code Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

# 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.

Cardiovascular Systems, Inc.

1.

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

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

2. Delaware

3. 41-1698056

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

(FEI number, if applicable)

12/06/2000

5. Perpetual

(Date of incorporation)

(Date of duration, if other than perpetual)

6.

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

1225 Old Highway 8 NW, St. Paul, MN 55112

7.

(Principal office address)

(Current mailing address, if different)

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

Name: C T Corporation System

Office Address:

1200 South Pine Island Road

Plantation

(City)

, Florida 33324  
(Zip code)

9. 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.

C T Corporation System

By:

*Kristen Lichvarcik*

Kristen Lichvarcik, Assistant Secretary

(Registered agent's signature)

10. 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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## 11. Names and business addresses of officers and/or directors:

**A. DIRECTORS**Chairman: Scott R. WardAddress: Cardiovascular Systems, Inc., 1225 Old Highway 8 NW, St. Paul, MN 55112Director: Scott BartosAddress: Cardiovascular Systems, Inc., 1225 Old Highway 8 NW, St. Paul, MN 55112Director: Brent BlackeyAddress: Cardiovascular Systems, Inc., 1225 Old Highway 8 NW, St. Paul, MN 55112Director: Edward BrownAddress: Cardiovascular Systems, Inc., 1225 Old Highway 8 NW, St. Paul, MN 55112\*See Addendum for additional Board of Directors**B. OFFICERS**President: Scott R. Ward, President/CEOAddress: Cardiovascular Systems, Inc., 1225 Old Highway 8 NW, St. Paul, MN 55112Vice President: Kevin J. Kenny, Chief Operating OfficerAddress: Cardiovascular Systems, Inc., 1225 Old Highway 8 NW, St. Paul, MN 55112Secretary: Alexander Rosenstein, General Counsel and Corporate SecretaryAddress: Cardiovascular Systems, Inc., 1225 Old Highway 8 NW, St. Paul, MN 55112Treasurer: Laurence L. Betterley, Chief Financial OfficerAddress: Cardiovascular Systems, Inc., 1225 Old Highway 8 NW, St. Paul, MN 55112 - \*\*See Addendum for additional officers.

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

12. Jeff Points Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Jeff Points, Vice President, Corporate Controller & Treasurer

(Typed or printed name and capacity of person signing application)

**\*ADDENDUM TO NO. 11 – BOARD OF DIRECTORS:**

Director:	William E. Cohn, M.D.
Address:	Cardiovascular Systems, Inc., 1225 Old Highway 8 NW, St. Paul, MN 55112
Director:	Augustine Lawlor
Address:	Cardiovascular Systems, Inc., 1225 Old Highway 8 NW, St. Paul, MN 55112
Director:	Martha Aronson
Address:	Cardiovascular Systems, Inc., 1225 Old Highway 8 NW, St. Paul, MN 55112

**\*\*ADDENDUM TO NO. 12 – OFFICERS:**

Officer:	Laura J. Gillund, Chief Talent Officer
Address:	Cardiovascular Systems, Inc., 1225 Old Highway 8 NW, St. Paul, MN 55112
Officer:	Sandra M. Sedo, Corporate Compliance Officer
Address:	Cardiovascular Systems, Inc., 1225 Old Highway 8 NW, St. Paul, MN 55112
Officer:	Jeff Points, Vice President, Corporate Controller & Treasurer
Address:	Cardiovascular Systems, Inc., 1225 Old Highway 8 NW, St. Paul, MN 55112

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# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CARDIOVASCULAR SYSTEMS, 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 FIFTH DAY OF OCTOBER, A.D. 2017.

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

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



3325495 8300

SR# 20176500120

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 203351646

Date: 10-05-17