

F220000 04534

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

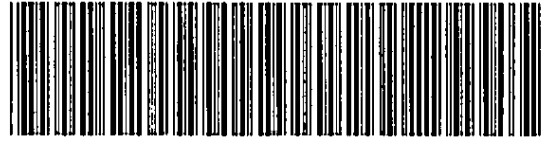
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2022 JUL 15 PM 4:44

S. FRANKLIN  
JUL 20 2022

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SetPoint Medical Corporation  
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:

<u>Kelly Jones</u>	_____	Name of Person
<u>SetPoint Medical Corporation</u>	_____	Firm/Company
<u>25101 Rye Canyon Loop</u>	_____	Address
<u>Valencia, CA 91355</u>	_____	City/State and Zip code
<u>kjones@setpointmedical.com</u>	_____	E-mail address: (to be used for future annual report notification)

2022 JUN 15 PM 4:44

For further information concerning this matter, please call:

<u>Kelly Jones</u>	at (661	) 992-9024
Name of Person	Area Code	Daytime Telephone Number

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- |  |   |  |   |
|--|---|--|---|
| <input checked="" type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$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.

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

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

2. Delaware 3. 20-4513487
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 3-10-2006 5.
(Date of incorporation) (Date of duration, if other than perpetual)

6. 6/7/2021
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 25101 Rye Canyon Loop, Valencia, CA 91355
(Principal office street address)

(Current mailing address, if different)

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

Name: CT Corporation System

Office Address: 1200 S Pine Island Rd #250

Plantation Florida 33524
(City) (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.

[Handwritten signature]

- Peter Trawinski, 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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

2022 JUL 16 PM 4:14

**A. DIRECTORS**

Chairman Name: Murthy Simhambhatla

Vice Chairman Address: \_\_\_\_\_

Director 25101 Rye Canyon Loop

President Valencia, CA 91355

Vice President \_\_\_\_\_

Secretary  Treasurer

Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: Allan Will

Vice Chairman Address: \_\_\_\_\_

Director 101 Station One

President Corolla, NC 27927

Vice President \_\_\_\_\_

Secretary  Treasurer

Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: Hank Plain

Vice Chairman Address: Morgenthaler

Director 2884 Sand Hill Road, Ste 121

President Menlo Park, CA 94025

Vice President \_\_\_\_\_

Secretary  Treasurer

Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: Josh Makower

Vice Chairman Address: NEA

Director 2855 Sand Hill Road

President Menlo Park, CA 94025

Vice President \_\_\_\_\_

Secretary  Treasurer

Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: David Chernoff

Vice Chairman Address: \_\_\_\_\_

Director 25101 Rye Canyon Loop

President Valencia, CA 91355

Vice President \_\_\_\_\_

Secretary  Treasurer

Other CMO  Other \_\_\_\_\_

Chairman Name: Juan-Pablo Mas

Vice Chairman Address: Action Potential Venture Cap

Director 354 University Ave

President Palo Alto, CA 94301

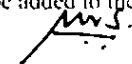
Vice President \_\_\_\_\_

Secretary  Treasurer

Other \_\_\_\_\_  Other \_\_\_\_\_

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Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12.   
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. Murthy Simhambhatla, President & CEO  
(Typed or printed name and capacity of person signing application)

# Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SETPOINT MEDICAL CORPORATION" 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 ELEVENTH DAY OF MAY, A.D. 2022.

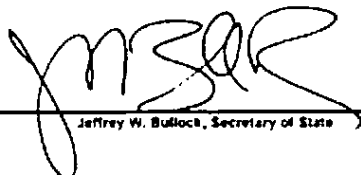
AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SETPOINT MEDICAL CORPORATION" WAS INCORPORATED ON THE TENTH DAY OF MARCH, A.D. 2006.

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

2022  
MAY 15  
PM 4:14



  
Jeffrey W. Bullock, Secretary of State

4116391 8300

SR# 20221905260

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

Authentication: 203397954

Date: 05-11-22



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

EMAILED

~~AF~~ Kelly

6/28/22

5 pages

June 18, 2022

KELLY JONES  
25101 RYE CANYON LOOP  
VALENCIA, CA 91355 US

SUBJECT: SETPOINT MEDICAL CORPORATION  
Ref. Number: W22000083033

We have received your document for SETPOINT MEDICAL CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$150.00.

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) 245-6051.

Sharon D Franklin  
Regulatory Specialist II

Letter Number: 022A00013740