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N. FONAWANDA NY 14120
(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 28, 2004

FEI PRODUCTS LLC 825 WURLITZER DRIVE N. TONAWANDA, NY 14120

Ref. Number: W04000015827

We have received your document for and your check(s) totaling \$1175.00. However, the document has not been filed and is being retained in this office for the following:

Please accept our apology for failing to mention this in our previous letter.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6890.

Jason Merrick Document Specialist

Letter Number: 404A00037403

FILED SECRETARY OF STATE DIVISION OF COMPORATIONS



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 23, 2004

FEI PRODUCTS LLC 825 WURLITZER DRIVE N. TORNAWANDA, NY 14120

SUBJECT: FEI WOMEN'S HEALTH LLC

Ref. Number: W04000015827

We have received your document for FEI WOMEN'S HEALTH LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$1050.00.

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) 245-6890.

Jason Merrick Document Specialist

Letter Number: 204A00027015

04 JUN 14 PM 1: 29

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: (Name of foreign limited liability company) urisdiction under the law of which foreign limited liability company is organized) (Date of Organization) (Duration: Year limited liability company will cease to in Florida. (See sections 608.501, 608.502, and 817.155, F.S.) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recommendations of the control of the the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Solicitat Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Typed or printed name of signee

	Tachinole Number	203-248-4462	716 885-1485	716 626 6536	000-000-017	300-5/2-3331	212-420-1000	0.00-040-044	908-229-4761
Recidence Address	One Royal Palm Way Dalm Beach El 32480	95 Louvain Street Eartield CT 06432	121 Jackman Lane, Filma, NY 14059	32 (whurst Road Amberst NY 14226	38 Birel Avenue Summit N 1 07001	1675 York Avenue Apt 6C New York NY 10129	424 30th Street Manhattan Reach CA 00388	211 Fast Interlation Boulevard Seattle WA 08140	5 Oak Ridge Drive, Belie Mead, NJ 08502
Title	Co-Chairman	Assistant Secretary	Chief Financial Officer & Treasurer	Chief Operating Officer	Co-Chairman & Secretary	Assistant Secretary	President & Chief Executive Officer	Vice President of Business Development	Executive Vice President of Sales
* SS	372-50-0756	579-04-3806	065-56-0802	059-46-5391	060-54-9720	079-46-7175	090-62-1015	469-82-0603	281-44-0369
Name	Charles S. Craig	Ridgley H. Cromwell	Jennifer M. Gates	Bruce M. Bronnenkant	Robert J. Kelly	Michael G. Manasse	Fraderick W. Studier	James Bloom	Scott Coleridge

SECRETARY OF STATE DIVISION OF CORPORATIONS

04 JUN 14 PM 1:29

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1.	. The name of the Limited Liability Company is:					
	FEI Women's Health LLC					
2.	The name and the Florida street address of the registered agent and office are:					
	National Corporate Research, LTD, Inc.					
	103 N. Meridian Street Florida street address (P.O. Box NOT ACCEPTABLE)					
	Tallahassel, FL 32301 (City/State/Zip)					

Having been named as registered agent and to accept service of process for the above stated limited plability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of a statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Nayre Rafavell. 19

SECRETARY OF STATE SECRETARY OF STATE DIVISION OF CORPORATIONS

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FEI WOMEN'S HEALTH LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTH DAY OF APRIL, A.D. 2004.



Warriet Smith Hindson Harriet Smith Windson, Secretary of State

AUTHENTICATION: 3042056

DATE: 04-08-04