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Office Use Only



December 3, 2008

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

RE: EBI, LLC

Dear Sir or Madame:

Enclosed please find our Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida, along with our check number 511389 in the amount of \$125.00 for the filing fee.

Please return the filed documents to me at the address below.

Sincerely,

Shelley Horn Legal Assistant

shelley.horn@biomet.com

Mailing Address:

P.O. Box 587

Warsaw, IN 46581-0687 Toll Free: 800-348-9500

Office: 574-276-6639 Direct: 574-372-1542

Legal Dept. Fax: 574-372-1960

**Shipping Address:** 

56 East Bell Drive Warsaw, IN 46582

### **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: EBI, LLC (Name of Limit	ted Liability Company)			
	pility Company for Authorization to Transact Business in bmitted to register the above referenced foreign limited			
Please return all correspondence concerning this ma	atter to the following:			
Bradley J. Tandy (Nar	ne of Person)			
Biomet, Inc(Firm	n/Company)			
P.O. Box 587	(Address)			
Warsaw, IN 46581-0587 (City/State and Zip Code)				
For further information concerning this matter, plea	ase call:			
Shelley Horn (Name of Person)	at ( 574 ) 372–1542 (Area Code & Daytime Telephone Number)			
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed is a check for the following amount:  \$\sum{125.00 Filing Fee}\$ \$\sum{130.00 Filing Fee & Certificate of }\$	\$155.00 Filing Fee & \$\Bigcup\$160.00 Filing Fee, Certificate Status Certified Copy of Status & Certified Copy			

## 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:

1.	EBI, LLC	
٠٠.	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
Вi	omet Trauma, Biomet Spine, Biomet Bracing, and Biomet Osteobiologics, LLC	
(If	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the	written
	sent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabili mpany," "L.L.C.," "LLC.")	ty
Coi	impany, E.E.C., EEC. )	
2	Indiana 3.  Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)	
	company is organized)	
4	May 2/ 1000 5 Page 4:01	
4.	May 24, 1999  (Date of Organization)  5. Perpetual (Duration: Year limited liability company will cease to	
	exist or "perpetual")	(Eta.wa
6.		iş .
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
	$\sim$	N Market
7.	100 Interpace Parkway	3
	Parsippany, NJ 07054	و مناطقات المادية المناسعة (1
	(Street Address of Principal Office)	
o	If limited liability company is a manager-managed company, check here X	
ο.	If infilted hability company is a manager-managed company, eneck here [22]	
9.	The name and usual business addresses of the managing members or managers are as follows:	
	Jeffrey R. Binder 56 East Bell Drive, Warsaw, IN 46582	
	Bradley J. Tandy 56 East Bell Drive, Warsaw, IN 46582	
	I Dat Dichardson 56 Fact Boll Drive Marcon IN 46582	
	J. Pat Richardson 56 East Bell Drive, Warsaw, IN 46582	
10	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of rec	ords in
	jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a	01000111
	nslation of the certificate under oath of the translator must be submitted.)	
П	. Nature of business or purposes to be conducted or promoted in Florida:	
	sale and marketing of medical implant devices	
	TIN-	
	ay 11/	
	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.)	
	Bradley J. Tandy	

Typed or printed name of signee

## 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:  EBI, LLC	
If name unavailable, the alternate name to be used in the state of Florida is:	
Biomet Trauma, Biomet Spine, Biomet Bracing, and Biomet Osteobio	logics, LLC
2. The name and the Florida street address of the registered agent and office are:	OB DEC
Corporate Creations Network, Inc. (Name)	SSS - 6
11380 Prosperity Farms Road #221E  Florida Street Address (P.O. Box NOT ACCEPTABLE)	PH 2: 23 OF STATE EFT ORIDA
Palm Beach Gardens, FL 33410 City/State/Zip	ŭ

Having been named as registered agent and to accept service of process for the above stated limited liability 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 all 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, Florida Statutes.

Valerie Hawk, Special Secretary

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

#### CONSENT OF THE MANAGER OF EBI, LLC TO ACTION WITHOUT A MEETING

The undersigned, being the Managers of EBI, LLC (the "Company"), hereby consent that the following action may be, and the same hereby is, taken without a meeting of the Managers of the Company:

I.

RESOLVED, that EBI, LLC may register with any State within the United States under its assumed name of Biomet Trauma, Biomet Spine, Biomet Bracing, and Biomet Osteobiologics.

Π.

Resolved, that this Consent be in lieu of a meeting of the partners of the Company, and shall be filed in the minute book of the Company in place of any minutes of any such meeting.

Effective as of this 11th day of August, 2008.

Jeffrey R. Binder

Bradley J. Tandy

J. (Pat Richardson

## STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

#### EBI, LLC

duly filed the requisite documents to commence business activities under the laws of State of Indiana on May 24, 1999, and was in existence or authorized to transact business in the State of Indiana on November 13, 2008.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Thirteenth Day of November, 2008.

TODD ROKITA, Secretary of State

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