

CT CORPORATION

F020000001689

CORPORATION(S) NAME

Survivalink Corporation

FILED
02 APR - 1 AM 9:39
TALLAHASSEE, FLORIDA

FILED
02 APR - 1 AM 9:39
TALLAHASSEE, FLORIDA

FILED
02 APR - 4 PM 3:25
TALLAHASSEE, FLORIDA

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|--|---|---|
| <input checked="" type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Nonprofit | | |
| <input checked="" type="checkbox"/> Foreign | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| | <input type="checkbox"/> Reinstatement | |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> LLC | <input type="checkbox"/> Name Registration | <input type="checkbox"/> Change of RA |
| | <input type="checkbox"/> Fictitious Name | <input type="checkbox"/> UCC |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Photocopies | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

Name _____
 Availability _____
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 Examiner _____
 Updater _____
 Verifier _____
 W.P. Verifier _____

4/4/02

Order#: 5244446

Ref#: _____

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-04/05/02--01004--003

Amount: \$ ****1150.00 ****1150.00

700005193427--4

-04/05/02--01004--004

*****70.00 *****70.00

660 East Jefferson Street
 Tallahassee, FL 32301
 Tel. 850 222 1092
 Fax 850 222 7615

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Survivalink 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", 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:

Wendy Jackson
(Name of Person)

Cardiac Science Acquisition Corp.
(Firm/Company)

5420 FELT Road
(Address)

Minnetonka, MN 55343
(City/State and Zip code)

For further information concerning this matter, please call:

Wendy Jackson at (952) 939-2930
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

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

1. Survivalink Corporation

(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Minnesota

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

3. 22-3833596

(FEI number, if applicable)

4. 02/14/01

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. 09/27/01

(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 16931 Millikan Ave Irvine, CA 92606

(Principal office address)

8. 5420 FELT Road Minnetonka, MN 55343

(Current mailing address)

9. The Purpose of the Corporation is to Engage in any lawful act or activity for which for Profit Corporations may be organized under Chapter 302A of MN Statutes
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

, Florida 33324

(Zip code)

10. 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: [Signature]

(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.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: SEE ATTACHED

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: SEE ATTACHED

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. 

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Rod de Greef Exec. V. P. + CFO

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

02 APR -4 AM 9:39
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SURVIVALINK CORPORATION

OFFICERS

CEO/President/Treasurer/Secretary

Raymond W. Cohen
16931 Millikan Avenue
Irvine, CA 92606
Phone: 949-587-0357
SS# 132-52-4280

Executive Vice President and CFO

Roderick de Greef
16931 Millikan Avenue
Irvine, CA 92606
Phone: 949-587-0357
SS# 573-27-3498

Senior Vice President, Operations

Guy Sohie, Ph.D.
16931 Millikan Avenue
Irvine, CA 92606
Phone: 949-587-0357
SS# 202-58-4822

Chief Technical Officer

Kenneth F. Olson
5420 Feltl Road
Minnetonka, MN 55343
Phone: 952-939-4181
SS# 471-84-3137

Chief Product Development Officer

Prabodh Mathur
16931 Millikan Avenue
Irvine, CA 92606
Phone: 949-587-0357
SS# 497-84-2056

Chief Software Architect

Dongping Lin
16931 Millikan Avenue
Irvine, CA 92606
Phone: 949-587-0357
SS# 377-94-3981

Vice President, Sales & Marketing

Michael Gioffredi
16931 Millikan Avenue
Irvine, CA 92606
Phone: 949-587-0357
SS# 573-76-6165

BOARD of DIRECTORS

CEO/President/Treasurer/Secretary

Raymond W. Cohen
16931 Millikan Avenue
Irvine, CA 92606
Phone: 949-587-0357
SS# 132-52-4280

Chairman of the Board

Howard L. Evers
16931 Millikan Avenue
Irvine, CA 92606
Phone: 949-587-0357

Robert Carpenter
9 Lowell Road
Wellesley Hills, MA 02481
Phone: 617-236-4440

Peter Crosby
4600 West 60th Avenue
Arvada, CO 80003
Phone: 720-540-0200

Brian Dovey
One Palmer Square
Princeton, NJ 08542
Phone: 609-683-5656

Paul Quadros
10865 Altman Row, Suite 200
San Diego, CA 92121
Phone: 858-450-5949

Erich Sager
Muhlebachstrasse 54
CH-8034 Zurich, Switzerland
Phone: +41 1 268 8830

02 APR -4 AM 9:39
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

State of Minnesota

SECRETARY OF STATE

Certificate of Good Standing

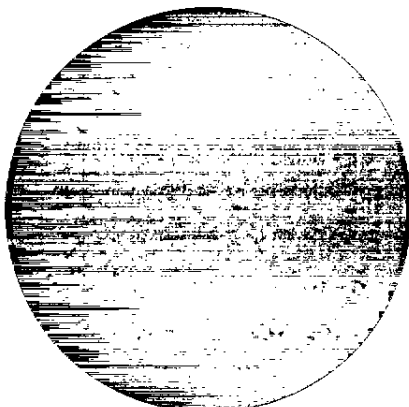
I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: Survivalink Corporation

Date Formed: 02/14/2001

Chapter Governed By: 302A

This certificate has been issued on 04/02/02.



Mary Kiffmeyer
Secretary of State.

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APR -4 AM 9:39
MINNESOTA SECRETARY OF STATE
MINNEAPOLIS, MINN.