# F03000001531

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filling Officer:  3136 FOR CORP				

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SECRETARY OF STATE

#### **CT** CORPORATION

March 28, 2003

Secretary of State, Florida 409 East Gaines Street Tallahassee FL 32399

Re: Order #: 5760861 WO

Customer Reference 1: Novare

Customer Reference 2: Novare Various Qualificat

Dear Secretary of State, Florida:

Please file the attached:

Novare Surgical Systems, Inc. (DE) Qualification Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Brigham Weir Fulfillment Specialist Brigham\_Weir@cch-lis.com

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

## 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. Novare Surgic	al Systems, Inc.	one and the second of the sec	*
words or abbre	oration; must include the word "INCORPORATE viations of like import in language as will clearly or partnership if not so contained in the name at p	indicate that it is a corporation instead of a	
2. Delaware	3. 3	77-0508275	<u></u>
(State or count	try under the law of which it is incorporated)	(FEI number, if applicable	<del>2</del> )
4. 02/24/1999	5. 1	Perpetual	ومعيدون والمراجعة
(Da	te of incorporation)	(Duration: Year corp, will cease to exist	or "perpetual")
6. JAN 14	2002		
	acted business in Florida. If corporation has not t (SEE SECTIONS 607.1501,		qualification.")
7. 10231 Bubb R	oad, Cupertino, CA 95014		<u> </u>
	(Principal office addre	ess)	
same		<u> </u>	<b>⊕</b>
	(Current mailing addre	ess)	
Sales of Medic	cal Devices and related products.		
8	e(s) of corporation authorized in home state or cou	677	<u> </u>
(Purpose	e(s) of corporation authorized in nome state or cou	intry to be carried out in state of Florida)	
9. Name and st	reet address of Florida registered agent: (	P.O. Box or Mail Drop Box NOT acc	eptable)
Name:	C T Corporation System		3 X
		<del></del>	
Office Address:	1200 South Pine Island Road	<u> </u>	-\$S -\$S -\$S
	Plantation	, Florida 33324	me R m
	(City)	(Zip code)	
10 Destatement			<b>1.</b>
	agent's acceptance: med as registered agent and to accept servic	ce of process for the above stated core	D-1
designated in th	is application, I hereby accept the appointm	ent as registered agent and agree to a	act in this capacity. I
	comply with the provisions of all statutes re		formance of my
aunes, ana 1 am	a familiar with and accept the obligations of	my position as registerea agent.	
	. C T.Corporation System	NACETA .	
Ву:	/ Mon H- W	NASEEM A. SPECIAL ASST. S	CONDE
	(Registered agent's sig	inature)	ECRETARY

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.

.<u>\*</u>-

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

A. DIRECTORS	SEE ATTACHMENT	
Chairman:		
Address:		ود المحمولية
		१३ १ इस 🛒 💉 💹 💮
Vice Chairman:		تعبر يو معدن ال
Address;		
Director:		
Address:		
Aumess.		· ·
Director:		A COLORADO
Address:	——————————————————————————————————————	<u> </u>
B. OFFICERS	SEE ATTACHMENT	
President: Greg Patterson	· · · · · · · · · · · · · · · · · · ·	
Address: 10231 Bubb Road	and the second s	<u>, , , , , , , , , , , , , , , , , , , </u>
Cupertino, CA 950	014	<u></u>
Vice President: George A. H	larter, Jr.	
Address: 10231 Bubb Road	· · · · · · · · · · · · · · · · · · ·	
Cupertino, CA 950	014	
Secretary: Casey McGlynn		
	Cupertino, CA 95014	
	· · · · · · · · · · · · · · · · · · ·	
reasurer;		<u>F</u>
Address:	- contract of the contract of	<u> </u>
NOTE: If necessary, you	may attach an addendum to the application listing additional officers a	and/or directors.
4 to H	with	
(Signature	of Chairman, Vice Chairman, or any officer listed in number 12 of th	e application)
14. George A. Harter, Jr., V		
T)	yped or printed name and capacity of person signing application)	

#### Attachment to Florida

#### **Officers & Directors**

1.	Full Name:	Kermit R. Pope, Jr.
	Officer/Director:	Officer
	Officer's Title:	CEO
	Business Address:	10231 Bubb Road
	City:	Cupertino
	State:	CA
	ZIP Code:	95014
2.	Full Name:	Greg Patterson
	Officer/Director:	Officer
	Officer's Title:	President
	Business Address:	10231 Bubb Road
	City:	Cupertino
	State:	CÂ
	ZIP Code:	95014
3.	Full Name:	George A. Harter, Jr.
	Officer/Director:	Officer
	Officer's Title:	CFO, VP
	Business Address:	10231 Bubb Road
	City:	Cupertino
	State:	CÂ
	ZIP Code:	95014
4.	Full Name:	Casey McGlynn
	Officer/Director:	Officer
	Officer's Title:	Secretary
	Business Address:	10231 Bubb Road
	City:	Cupertino
	State:	CA
	ZIP Code:	95014
_		
5.	Full Name:	Ed Chang
	Officer/Director:	Director
	Officer's Title:	
	Business Address:	10231 Bubb Road
	City:	Cupertino
	State:	CA
	ZIP Code:	95014
,	Yould Manney	779 7 To 8 470
6.	Full Name:	Thomas J. Fogarty, MD
	Officer/Director:	Director
	Officer's Title:	10001 D 11 D
	Business Address:	10231 Bubb Road
	City:	Cupertino
	State:	CA
	CETTO CO. 1	0.504.4

95014

ZIP Code:

7. Full Name:
Officer/Director:
Officer's Title:

Business Address:

City: State: ZIP Code:

8. Full Name:

Officer/Director:

Officer's Title:

Business Address:

City: State: ZIP Code: W. Gregory Shearer

Director

10231 Bubb Road

Cupertino CA

Allan Will Director

95014

10231 Bubb Road

Cupertino

CA 95014

# Delaware

PAGE 1

### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NOVARE SURGICAL 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 THIRTEENTH DAY OF MARCH, A.D. 2003.

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

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



Harriet Smith Hindson

DATE: 03-13-03

Harriet Smith Windsor, Secretary of State
AUTHENTICATION: 2306859

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