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(Requestor's Name)
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CT CORPORATION

April 23, 2003

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



Re:

Order #: 5836083 SO

Customer Reference 1: Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Suros Surgical Systems, Inc. (IN) Qualification Florida

Please return a good standing certificate along with regular evidence.

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,

Jeffrey J Netherton Sr. Fulfillment Specialist Jeff_Netherton@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

Suros Sur	gical Systems, Inc.	USINESS IN THE STATE OF FLORIDA!	} (
(Name of corpo	ration; must include the word "INCORPORATE viations of like import in language as will clearly or partnership if not so contained in the name at programme in the same at the same at programme in the same at th	D", "COMPANY", "CORPORATION" or indicate that it is a corporation instead of a resent.)	273 84
Indiana	3	35-2115487	
	under the law of which it is incorporated)	(FEI number, if applicable)	4
6	-21-2000 5	Perpetual	
(Dat		(Duration: Year corp. will cease to exist or "perpetual"	")
Upon Qu	alification		
(Date first transa	cted business in Florida. If corporation has not to (SEE SECTIONS 607.1501,	ransacted business in Florida, insert "upon qualification 607.1502 and 817.155, F.S.)	ı.")
9502 Ang	pola Court, Suite 3, Indianapolis, India	ana 46268	
	(Principal office addre	ess)	
Same as	above		
	(Current mailing addre	ess)	_
	dical devices	· -	
	dical devices (s) of corporation authorized in home state or cou	entry to be carried out in state of Florida)	_
(Purpose	s) of corporation authorized in home state or cou	untry to be carried out in state of Florida) (P.O. Box or Mail Drop Box NOT acceptable)	_
(Purpose	s) of corporation authorized in home state or cou		
(Purposed	s) of corporation authorized in home state or courset address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	
(Purposed Name and str Name:	s) of corporation authorized in home state or courset address of Florida registered agent: (CT Corporation System	P.O. Box or Mail Drop Box NOT acceptable)	
(Purposed Name and str Name:	s) of corporation authorized in home state or coureet address of Florida registered agent: (CT Corporation System 1200 South Pine Island Road		

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				0,5
Chairman: See Exhibit "A" attached	t hereto and mad	le a part hereof		
Address:				E 3 5
ice Chairman:				- 200
ddress:			<u> </u>	
	 -			
irector:				
ddress:		-		
irector:		_ =		
ddress:		<u> = =</u>		<u></u>
. OFFICERS				
resident: See Exhibit "B" attache	d hereto and mad	de a part hereof		
resident:				
ddress:				
				
ice President:				<u> </u>
ddress:		τ τ	***	······
				
ecretary:			<u>.</u>	<u>.</u>
ddress:				
reasurer:				
ddress:				
OTE: If necessary, you may attach as	n addendum to the a	pplication listing add	litional officers and	or directors.
3 X. X	N UW			
(Signature of Chairman	, Vice Chairman, or	any officer listed in	number 12 of the ap	oplication)
4. Rich Rella, Chief Financial	Officer			
	ed name and capacit	ty of person signing	application)	

Exhibit "A" [Board of Directors]

- Mr. James R. Baumgardt
 Bank One Center/Tower
 111 Monument Circle, Suite 3570
 Indianapolis, IN 46204
- Ms. Phyllis Greenberger
 1828 L Street, NW
 Washington, DC 20036
- 3. Mr. Joseph L. Mark 3049 Hudson Street Franklin, IN 46131
- Mr. William Ringo
 4906 Deer Ridge Drive N
 Carmel, IN 46033-8904
- 5. Dr. Timothy A. Goedde 8180 Clearvista Parkway, Suite 100 Indianapolis, IN 46256
- 6. Mr. Michael G. Hall 111 Monument Circle, Suite 1022 Indianapolis, IN 46204
- 7. Mr. Michael E. Miller 3049 Hudson Street Franklin, IN 46131
- Mr. Gene Henderson
 One Indiana Square, Suite 2600
 Indianapolis, IN 46204



Exhibit "B" [Directors]

- Jim Pearson, President/Chief Executive Officer
 9502 Angola Court, Suite 3
 Indianapolis, Indiana 46268
- 2. Rich Rella, Vice President/Chief Financial Officer 9502 Angola Court, Suite 3
 Indianapolis, Indiana 46268
- 3. Mike Hall, Treasurer/Secretary 111 Monument Circle, Suite 1022 Indianapolis, Indiana 46204



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

To Whom These Presents Come, Greetings:

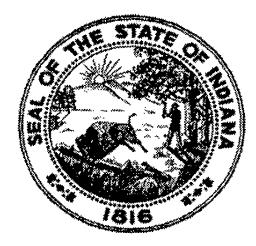
I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

SUROS SURGICAL SYSTEMS, INC.

duly filed the requisite documents to commence business activities under the laws of State of Indiana on June 21, 2000, and was in existence or authorized to transact business in the State of Indiana on March 26, 2003.

I further certify this For-Profit Domestic Corporation 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 Twenty-Sixth Day of March, 2003.

TODD ROKITA, Secretary of State

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