

FO400000002953

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

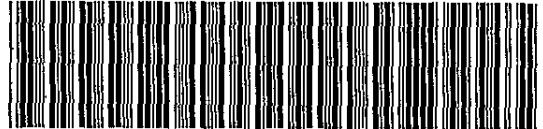
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04 MAY 21 PM 12:04
CLERK OF DISTRICT COURT
JULIA M. HARRIS

JB
5-27-04

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Inspire Medical Equipment and Services, Inc.
(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:

Richard A. Mayo

(Name of Person)

Inspire Medical Equipment and Services, Inc.

(Firm/Company)

911 7th Avenue

(Address)

Vero Beach, FL 32960

(City/State and Zip code)

For further information concerning this matter, please call:

Richard A. Mayo

(Name of Person)

at (772) 473-7103

(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

AND
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04 MAY 21 PM 12:05
SECRETARY OF STATE
TALLAHASSEE, FL 32314

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

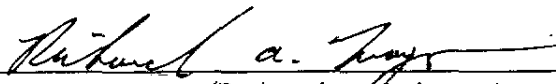
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Inspire Medical Equipment Services, Inc.
(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. Massachusetts 3. 20-0403959
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 11/19/2003 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon qualification
(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. 911 7th Avenue, Vero Beach, FL 32960
(Principal office address)
Same
(Current mailing address)
8. Billing offices
(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: Richard A. Mayo
Office Address: 208 Spinnaker Drive
Vero Beach, Florida 32963
(City) (Zip code)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.


(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: Richard A. Mayo

Address: 208 Spinnaker Drive

Vero Beach, FL 32963

Vice Chairman: _____

Address: _____

Director: Adam Karas

Address: 15 Meadow Drive

Middleton, MA

Director: Harold J. Pini

Address: 52 Uptack Road

Groveland, MA

B. OFFICERS

President: Richard A. Mayo

Address: 208 Spinnaker Drive

Vero Beach, FL 32963

Vice President: _____

Address: _____

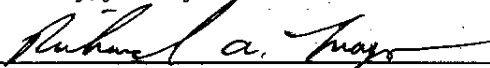
Secretary: _____

Address: _____

Treasurer: Harold J. Pini

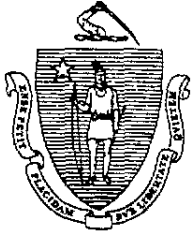
Address: 52 Uptack Road, Groveland, MA

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. Richard A. Mayo
(Typed or printed name and capacity of person signing application)

FILED
04 MAY 21 PM 12:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



The Commonwealth of Massachusetts
Secretary of the Commonwealth
State House, Boston, Massachusetts 02133

William Francis Galvin
Secretary of the
Commonwealth

May 3, 2004

TO WHOM IT MAY CONCERN:

I hereby certify that

INSPIRE MEDICAL EQUIPMENT & SERVICES, INC.

appears by the records of this office to have been incorporated under the General Laws of this Commonwealth on **November 19, 2003**.

I also certify that so far as appears of record here, said corporation still has legal existence.



In testimony of which,

I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

William Francis Galvin
Secretary of the Commonwealth