## INTEGRAL OFTHOREDICS



200054271642

125 Tycos Drive		
Toronto, Ontario	ı	
Canada M6B 1W	6	
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)	
Certified Copies	Certificate	s of Status
Special Instructions to I	Filing Officer:	

Office Use Only

05/18/05--01049--010 \*\*87.50

### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: INTEGRAL ORTHOPEDICS INC.	
(Name of corpora	ation - must include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for the Certificate of Existence," and check are submitted for transact business in Florida.	or Authorization to Transact Business in Florida," to register the above referenced foreign corporation to
Please return all correspondence concerning this ma	tter to the following:
Eric Miller	Long Long
	of Person)
Integral Orthopedics Inc.	三年 ここ
	Company)
125 Tycos Drive	FF 7
	ddress)
Toronto, Ontario, Canada M6B 1W6	100 A
	te and Zip code)
, ,	•
For further information concerning this matter, pleas	ee call:
Eric Miller at (416	785-1386 (ext 239)
	ea Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 Enclosed is a check for the following amount:	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
□ \$70.00 Filing Fee   □ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 24, 2005

ERIC MILLER
INTEGRAL ORTHOPEDICS INC.
125 TYCOS DRIVE
TORONTO, ONT. CANADA M6B 1W6,

SUBJECT: INTEGRAL ORTHOPEDICS INC.

Ref. Number: W05000025980

FILEU 2: 15
2005 JUH-2 PH 2: 15
DINATURA SSEE, FLORIDAS

We have received your document for INTEGRAL ORTHOPEDICS INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

We don't need the Certified Copy,

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Document Specialist

Letter Number: 905A00037434



A Division of Integral Orthopedics Inc.

May 30, 2005

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

Re: FEI # 98-0456178

To Whom It May Concern:

Please be advised that an application was filed a short time ago and was rejected because the attached document was not included. Please confirm to me by phone when the authorization has been approved. We would like to open our office without delay and hire the necessary employees in Florida. My phone number is: 888-225-7378 ext. 239.

I look forward to your reply.

Sincerely

Eric Miller, C.A. CFO



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

	E WITH SECTION 607.1503, FLORID. REIGN CORPORATION TO TRANSAC					
1. INTEGRAL OF	RTHOPEDICS INC.		,	4	色色色	7
(Enter name of c	corporation; must include "INCORPORAT corp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "(	CORPORATION,"	AHASSEE F	FILE DAY 2:
(If name unavail	able in Florida, enter alternate corporate na	ime	adopted for the purp	ose of transacting bu	siness in Florida).	5-
2. CANADA		3	98-0	0456178		r.
	under the law of which it is incorporated)		(FE	0456178 I number, if applicab	le)	•
4 March 9, 2005		5	Perpetual		-	•
(Date	of incorporation)	•		orp, will cease to exis	t or "perpetual")	
6. N/A					±.	
7. 125 Tycos Drive	(Date first transacted busine (SEE SECTIONS 607.1501 & 60 e, Toronto, Ontario, Canada M6B 1W6 (Principal office	7.1:	502, F.S., to determin		· · · · · · · · · · · · · · · · · · ·	
Same				-		
-	(Current mailing	add	ress)			•
8. Sales office.			; - <u>-</u> -			- 
(Purpose(s	s) of corporation authorized in home state (	or co	ountry to be carried o	out in state of Florida)	)	
9. Name and stree	et address of Florida registered agent:	(P.C	D. Box NOT accep	table)		
Name:	Brian Tuffin			- *	, , , , , , , , , , , , , , , , , , , ,	
Office Address:	15694 SW 15th Street		· • •	se e <del>re</del> cor	•	
	Pembroke Pines		, Florida 330			
	(City)		(Z	ip code)		
Having been nam designated in this further agree to c	gent's acceptance: ned as registered agent and to accept so application, I hereby accept the appo comply with the provisions of all statut with and accept the obligations of my	intr es r	nent as registered of relative to the prope	agent and agree to er and complete pe	act in this capa	city. I

- 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. DIRI	ECTORS
Chairman	Mr. Kem Rotman
Address:	22 St.Clair Avenue East, Suite 1700, Toronto, Ontario, Canada M4T 2S3
	,
Vice Chai	rman:
Address:	Se P F
_	STO B
Director:	Mr. Brian Tuffin
Address:	15694 SW 15th Street, Pembroke Pines, Florida 33027
	75 · · · · · · · · · · · · · · · · · · ·
Director:	Mr. John Fisher
	22 St.Clair Avenue East, Suite 1700, Toronto, Ontario, Canada M4T 2S3
Address:	22 Cardian Ayondo Last, Cardo (1700, 1070/10), Crimino, Cardo a 111-17 200
B. OFFI	CERS
President:	Mr. Brian Tuffin
Address.	15694 SW 15th Street, Penbroke Pines, Florida 33027
2 raa 033.	
Vice Presi	dent:
Address:	
Secretary:	No Debug Tulku
Address:	15694 SW 15th Street, Penbroke Pines, Florida 33027
Treasurer:	
Address:	
***	
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13	Giovatura of Director on Officer listed in purchase 12 of the confliction
	(Signature of Director or Officer listed in number 12 of the application)

}\*\*

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

14. Mr. Brian Tuffin, President 🕹 C.CO

Request ID:

007136906

Demande n°:

Transaction ID: 26642594

Transaction n°: Category ID: Catégorie :

Province of Ontario Province de l'Ontario

Ministry of Consumer and Business Services

Ministère des Services aux consommateurs et aux entreprises Companies and Personal Property Security Branch

Direction des compagnies et des suretés mobilières

Date Report Produced: 2005/05/31

Document produit le :

Time Report Produced: 09:48:20

Imprime a :

# CERTIFICATE OF STATUS ATTESTATION DU STATUT JURIDIQUE

This is to certify that according to the records of the Companies and Personal **Property Security Branch** 

D'après les dossiers de la Direction des compagnies et des sûretés mobilières, nous attestons que la société

INTEGRAL ORTHOPEDICS INC.

**Ontario Corporation Number** 

Numéro matricule de la société (Ontario)

002066850

is a corporation incorporated, amalgamated or continued under the laws of the Province of Ontario.

est une société constituée, prorogée ou née d'une fusion aux termes des lois de la Province de l'Ontario.

The corporation came into existence on

La société a été fondée le

MARCH 09 MARS, 2005

and has not been dissolved.

et n'est pas dissoute.

Dated

Fait le

MAY 31 2005

> Director Directrice