

## Florida Department of State

Division of Corporations

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Fax Number : (850)205-0383

From: Account Name : CORPORATION SERVICE COMPANY  
Account Number : 120000000195  
Phone : (850)521-1000  
Fax Number : (850)558-1575

RECEIVED  
05 JUL 21 AM 8:00  
DIVISION OF CORPORATION

**FOREIGN PROFIT QUALIFICATION****PRAXAIR HEALTHCARE SERVICES, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$70.00

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**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. Praxair Healthcare Services, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")  
  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Delaware 3. 45-0467418  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. February 22, 2002 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon registration  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 39 Old Ridgebury Road, Danbury, CT 06810-5113  
(Principal office address)  
  
Same as above  
(Current mailing address)
8. Sale and rental of medical equipment  
(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 NOT acceptable)  
  
Name: Corporation Service Company  
  
Office Address: 1201 Hays Street  
  
Tallahassee, Florida 32301  
(City) (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.*  
  
Corporation Service Company  
By: [Signature]  
(Registered agent's signature) Janet Budhu, Asst. Vice President
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: See attached

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**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: \_\_\_\_\_

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 Director or Officer listed in number 12 of the application)

14. Mark S. Lyon, Assistant Secretary  
(Typed or printed name and capacity of person signing application)

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**Directors / Officers Report**

As of 7/20/2005

**Praxair Healthcare Services, Inc.**

**Directors**

**Kathleen A. Kuberka** Director

Primary Address: 39 Old Ridgebury Road  
Danbury, Connecticut 06810-5113

**George P. Ristevski** Director

Primary Address: 39 Old Ridgebury Road  
Danbury, CT 06810-5113

**Richard L. Steinseifer** Director

Primary Address: 39 Old Ridgebury Road  
Danbury, CT 06810-5113

**Officers**

**George P. Ristevski** President and Chief Executive Officer

Primary Address: 39 Old Ridgebury Road  
Danbury, CT 06810-5113

**Michael J. Allan** Vice President and Treasurer

Primary Address: 39 Old Ridgebury Road  
Danbury, CT 06810-5113

**James T. Breedlove** Vice President

Primary Address: 39 Old Ridgebury Road  
Danbury, Connecticut 06810-5113 (United States)

**William J. Bryce** Vice President

Primary Address: 200 Sunset Ridge Road  
Willowbrook, IL 60521

**James S. Sawyer** Vice President

Primary Address: 39 Old Ridgebury Road  
Danbury, CT 06810-5113

**Richard L. Steinseifer** Vice President

Primary Address: 39 Old Ridgebury Road  
Danbury, CT 06810-5113

**Robert A. Bassett** Secretary

Primary Address: 39 Old Ridgebury Road  
Danbury, CT 06810-5113

**Mark S. Lyon** Assistant Secretary

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**Directors / Officers Report**

As of 7/20/2005

**Praxair Healthcare Services, Inc.**

Primary Address: 39 Old Ridgebury Road  
Danbury, CT 06810-5113

**S. Mark Seymour**

**Assistant Treasurer**

Primary Address: 39 Old Ridgebury Road  
Danbury, CT 06810-5113

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# Delaware

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## *The First State*

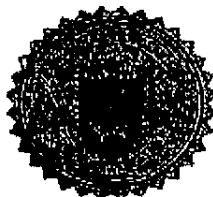
I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PRAXAIR HEALTHCARE SERVICES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF JULY, A.D. 2005.

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.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PRAXAIR HEALTHCARE SERVICES, INC." WAS INCORPORATED ON THE TWENTY-SECOND DAY OF FEBRUARY, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

3494712 8300

AUTHENTICATION: 4038083

050603628

DATE: 07-21-05

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