

# F06 0000000493

Florida Department of State  
Division of Corporations  
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**FOREIGN PROFIT/NONPROFIT CORPORATION**

**ATS Medical, Inc.**

Certificate of Status	0
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132-18-1

**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. ATS Medical, 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. Minnesota

(State or country under the law of which it is incorporated)

3. 41-1595629

(FEI number, if applicable)

4. 01/26/07

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. 01/01/2006

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 3905 Annapolis Ln. N. Suite 105, Plymouth, MN 55447

(Principal office address)

same

(Current mailing address)

8. Traveling sales representatives selling medical devices to hospitals wholesale.

(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: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

, Florida 33324

(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.*

CT Corporation System

By: Michele Miller

(Registered agent's signature)

**Michele Miller**

**Assistant Secretary**

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** *SEE ATTACHMENT*

Chairman: Michael D. Dale

Address: 3905 Annapolis Ln. N. Suite 105

Plymouth, MN 55447

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

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

Director: Eric Sivertson

Address: 3905 Annapolis Ln. N. Suite 105

Plymouth, MN 55447

Director: David D Koentopf

Address: 3905 Annapolis Ln. N. Suite 105

Plymouth, MN 55447

**B. OFFICERS** *SEE ATTACHMENT*

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

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

Vice President: Richard A. Curtis

Address: 3905 Annapolis Ln. N. Suite 105

Plymouth, MN 55447

Secretary: Deborah K. Chapman

Address: 3905 Annapolis Ln. N. Suite 105 Plymouth, MN 55447

Treasurer: \_\_\_\_\_

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

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Deborah K. Chapman

(Signature of Director or Officer listed in number 12 of the application)

14. Deborah K. Chapman, Secretary

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

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Attachment to Florida

**Officers & Directors**

1. Full Name: Michael D. Dale  
Officer/Director: Officer, Director  
Officer's Title: CEO  
Director's Title: Chairman  
Business Address: 3905 Annapolis Ln. N. Suite 105  
City: Plymouth  
State: MN  
ZIP Code: 55447
2. Full Name: John R. Judd  
Officer/Director: Officer  
Officer's Title: CFO  
Business Address: 3905 Annapolis Ln. N. Suite 105  
City: Plymouth  
State: MN  
ZIP Code: 55447
3. Full Name: Richard A. Curtis  
Officer/Director: Officer  
Officer's Title: Vice President  
Business Address: 3905 Annapolis Ln. N. Suite 105  
City: Plymouth  
State: MN  
ZIP Code: 55447
4. Full Name: Marc R. Sportsman  
Officer/Director: Officer  
Officer's Title: Vice President of Sales  
Business Address: 3905 Annapolis Ln. N. Suite 105  
City: Plymouth  
State: MN  
ZIP Code: 55447
5. Full Name: Maria T. Ajamil  
Officer/Director: Officer  
Officer's Title: VP of International Markets  
Business Address: 3905 Annapolis Ln. N. Suite 105  
City: Plymouth  
State: MN  
ZIP Code: 55447
6. Full Name: Deborah K. Chapman  
Officer/Director: Officer  
Officer's Title: Corporate Secretary  
Business Address: 3905 Annapolis Ln. N. Suite 105  
City: Plymouth  
State: MN  
ZIP Code: 55447

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7. Full Name: David D Koentopf  
Officer/Director: Director  
Officer's Title:  
Director's Title: Other Director  
Business Address: 3905 Annapolis Ln. N. Suite 105  
City: Plymouth  
State: MN  
ZIP Code: 55447
8. Full Name: Robert Munzenrider  
Officer/Director: Director  
Officer's Title:  
Director's Title: Other Director  
Business Address: 3905 Annapolis Ln. N. Suite 105  
City: Plymouth  
State: MN  
ZIP Code: 55447
9. Full Name: John D. Buck  
Officer/Director: Director  
Officer's Title:  
Director's Title: Other Director  
Business Address: 3905 Annapolis Ln. N. Suite 105  
City: Plymouth  
State: MN  
ZIP Code: 55447

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State of Minnesota

## SECRETARY OF STATE

### Certificate of Good Standing

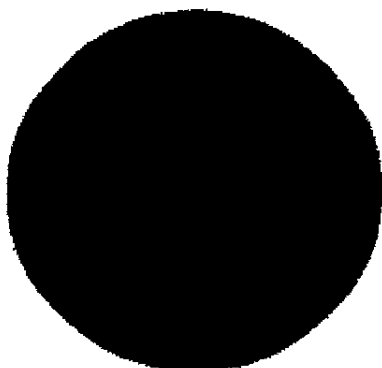
I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: ATS Medical, Inc.

Date Formed: 06/26/1987

Chapter Governed By: 302A

This certificate has been issued on 01/24/06.



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OFFICE OF THE SECRETARY OF STATE

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*Mary Kiffmeyer*  
Secretary of State.