F07000001302

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	·-·
(C	ity/State/Zip/Phone	#)
<u></u>	_	_
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name)
(De	ocument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to	Eiling Officer	<u> </u>
Special instructions to	Filing Officer.	•
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Office Use Only



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12/27/06--01027--002 **70.00

2001 MAR -7 P 4: 05
SECRETARY OF STATE

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140b-55425

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Empi, Inc.	
(Name of corporation - must include suf	ffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Tra "Certificate of Existence," and check are submitted to register the above ret transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
Elizabeth Toglia	
(Name of Person)	
Empi, Inc.	
(Firm/Company)	
9800 Metric Blvd	TAG 2
(Address)	LECH LLA
Austin, TX 78758	
(City/State and Zip code)	NRY SSE
For further information concerning this matter, please call:	OF STATE
Elizabeth Toglia at (512) 834-6338	₽ 01
(Name of Person) (Area Code & Daytime Te	lephone Number)
New Filing SectionNew FilingDivision of CorporationsDivision of Clifton BuildingP.O. Box	of Corporations
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$78.75 Filing Fee & S78.75 Filing Fee Certificate of Status Certified Copy	& \$87.50 Filing Fee, Certificate of Status & Certified Copy



December 28, 2006

ELIZABETH TOGLIA 9800 METRIC BLVD AUSTIN, TX 78758

SUBJECT: EMPI, INC.

Ref. Number: W06000055425

We have received your document for EMPI, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Letter Number: 306A00072877

Cynthia Blalock Document Specialist

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.

		me adopted for the purpose of transacting bu	siness in Florida)
Minnesota		3. <u>41-1310335</u>	
	under the law of which it is incorporated)	(FEI number, if applicab	le)
10/11/197		5. perpetual	4 - 44 4 - 112
(Date	e of incorporation)	(Duration: Year corp. will cease to exis	it or "perpetual")
0000 Mada	(SEE SECTIONS 607:1501 & 607	ss in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)	
9800 Metr	ic Blvd, Austin TX 78758 (Principal office a	\	
OPOO Mote	` •	idaress)	
3000 Meti	ic Blvd, Austin TX 78758 (Current mailing a		
Solicitatio			ccessories
(Purpose(n of sales of durable medics) of corporation authorized in home state or et address of Florida registered agent: (I	cal equipment and related acrountry to be carried out in state of Florida	2007 SEC
(Purpose(n of sales of durable medics) of corporation authorized in home state or et address of Florida registered agent: (I	cal equipment and related acrountry to be carried out in state of Florida	2001 NAR - SECRETAR
(Purpose(Name and stre Name:	n of sales of durable medics) of corporation authorized in home state or et address of Florida registered agent: (I CT Corporation System 1200 S. Pine Island Rd.	r country to be carried out in state of Florida P.O. Box NOT acceptable)	2001 NAR -7 SECRETARY O
(Purpose(Name and <u>stre</u> Name:	n of sales of durable medics) of corporation authorized in home state or et address of Florida registered agent: (I CT Corporation System 1200 S. Pine Island Rd. Plantation	r country to be carried out in state of Florida P.O. Box NOT acceptable)	2001 NAR - 7 P
(Purpose(Name and <u>stre</u> Name:	n of sales of durable medics) of corporation authorized in home state or et address of Florida registered agent: (I CT Corporation System 1200 S. Pine Island Rd.	cal equipment and related acrountry to be carried out in state of Florida	2001 NAR -7 P USECRETARY OF STA
(Purpose(Name and stre Name: ffice Address:	n of sales of durable medic s) of corporation authorized in home state or et address of Florida registered agent: (I CT Corporation System 1200 S. Pine Island Rd. Plantation (City) gent's acceptance:	r country to be carried out in state of Florida P.O. Box NOT acceptable) , Florida 33324 (Zip code)	2001 NAR -7 P U: 05 SECRETARY OF STATE
(Purpose(Name and stre Name: ffice Address: Registered a aving been name	n of sales of durable medic s) of corporation authorized in home state or et address of Florida registered agent: (I CT Corporation System 1200 S. Pine Island Rd. Plantation (City) gent's acceptance: ned as registered agent and to accept see	r country to be carried out in state of Florida P.O. Box NOT acceptable)	SECRETARY OF STATE POration at the plan
(Purpose(Purpose(Name and stre Name: office Address: Registered a laving been nan esignated in this urther agree to d	n of sales of durable medical solutions of corporation authorized in home state of the et address of Florida registered agent: (In the corporation System 1200 S. Pine Island Rd. Plantation (City) Gent's acceptance: The description of all statute in the provisions of all statute.	recountry to be carried out in state of Florida P.O. Box NOT acceptable) Plorida The state of Florida The s	SECRETARY OF STATE poration at the plant in this capacity act in this capacity
(Purpose(Purpose(Name and stre Name: Office Address: O. Registered a Laving been namesignated in this auther agree to a	n of sales of durable medical solution of corporation authorized in home state of the et address of Florida registered agent: (If the corporation System 1200 S. Pine Island Rd. Plantation (City) gent's acceptance: The description of a statute of the appointment of the provisions of all statutes of with and accept the obligations of my	recountry to be carried out in state of Florida P.O. Box NOT acceptable) The process for the above stated corrected agent and agree to be relative to the proper and complete per position as registered agent.	SECRETARY OF STATE poration at the plant in this capacity act in this capacity
(Purpose(. Name and stre Name: Office Address: O. Registered a Having been nan designated in this	n of sales of durable medical solutions of corporation authorized in home state of the et address of Florida registered agent: (In the corporation System 1200 S. Pine Island Rd. Plantation (City) Gent's acceptance: The description of all statute in the provisions of all statute.	recountry to be carried out in state of Florida P.O. Box NOT acceptable) The process for the above stated corrected agent and agree to be relative to the proper and complete perposition as registered agent.	SECRETARY OF STATE poration at the plant in this capacity act in this capacity

^{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. DIRE					
Chairman:	Kenneth W. Davidson				
Address:	9800 Metric Blvd	·			
<u>.</u>	Austin, TX 78758				
Vice Chair	rman:				_
Address:				<u></u>	
_					_
	William W. Burke				
Address: _	9800 Metric Blvd			•	
_	Austin, TX 78758				
	Harry L. Zimmerman				
Address:	9800 Metric Blvd				
:	Austin, TX 78758	·			
B. OFFI	CERS				
President:	Kenneth W. Davidson				
	9800 Metric Blvd	SEC ALL	7001		
	Austin, TX 78758	22 22	HAR	ا ا	
Vice Presid	dent:	TARY ASSEE	-	C HATTON Y	
		OF S	ס	£ # 1	
•		STATE	l: 0	13,0-	
Secretary:	Harry L. Zimmerman	À	05		
	9800 Metric Blvd, Austin TX 78758				
Treasurer:	William W. Burke				
	9800 Metric Blvd, Austin TX 78758				
	110				
NOTE: 1	If necessary, you may attach an addendum to the application listing additional officer	s and/or	directo	rs.	
13. —	District Off Ward in 12 of the Ward in				_
、Har	(Signature of Director or Officer listed in number 12 of the application) rry L. Zimmerman, Secretary/Director				
14. <u>- 14.</u>	(Typed or printed name and capacity of person signing application)	. · · · · · · · · · · · · · · · · · · ·			_

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.

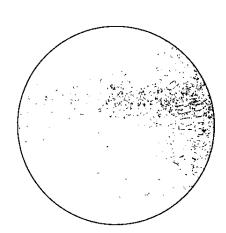
Name: Empi, Inc.

Date Formed: 10/11/1977

Chapter Governed By: 302A

This certificate has been issued on 12/07/06.

7001 MAR - 7 P 4: 05
SECRETARY OF STATE
TALL AMASSEE, FLORIDA



Mary Kiffmeyer Secretary of State.