

F09000003032

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RE-SUBMIT

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FOREIGN PROFIT/NONPROFIT CORPORATION

Vertos Medical, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	56
Estimated Charge	\$1,228.75

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July 29, 2009

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: VERTOS MEDICAL, INC.
REF: W09000034498

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

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

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Tim Burch
Regulatory Specialist II
New Filing Section

FAX Aud. #: H09000171384
Letter Number: 509A00025999

**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. Vertos 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. Delaware 3. 20-2214577
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 01/14/2005 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 03/17/2008
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 11 Columbia, Unit B, Aliso Viejo, CA 92656
(Principal office address)
- same
(Current mailing address)
8. Medical device manufacturing and sales
(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: C T Corporation System
- Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(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.

C T Corporation System

By:  Susan Wheeler, Assistant Secretary
(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.

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TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS SEE ATTACHMENT

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Harry Ross

Address: 500 Discovery Parkway, Suite 300

Superior, CO 80027

Director: Daniel M Watkins

Address: One Greenway Plaza, Suite 930

Houston, TX 77046

B. OFFICERS SEE ATTACHMENT

President: _____

Address: _____

Vice President: _____

Address: _____

Secretary: Bruce Feuchter

Address: 660 Newport Center Drive #1600, Newport Beach, CA 92660

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. James M Corbett, President
(Typed or printed name and capacity of person signing application)

**Attachment to Florida
Officers & Directors**

- 1 Full Name: James M. Corbett
Officer/Director: Officer
Officer's Title: President and Chief Executive Officer
Director's Title:
Business Address: 11 Columbia, Unit B
City: Aliso Viejo
State: CA
ZIP Code: 95131
- 2 Full Name: Myles Greenberg
Officer/Director: Director
Officer's Title:
Director's Title: Other Director
Business Address: 1055 Washington Boulevard, 6th Floor
City: Stamford
State: CT
ZIP Code: 06853
- 3 Full Name: Andrew Firlik
Officer/Director: Director
Officer's Title:
Director's Title: Other Director
Business Address: 105 Rowayton Avenue
City: Rowayton
State: CT
ZIP Code: 06853
- 4 Full Name: Daniel Pelak
Officer/Director: Director
Officer's Title:
Director's Title: Other Director
Business Address: 8601 Six Forks Road, Suite 400
City: Raleigh
State: NC
ZIP Code: 27615

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Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VERTOS MEDICAL, 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-THIRD DAY OF JULY, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

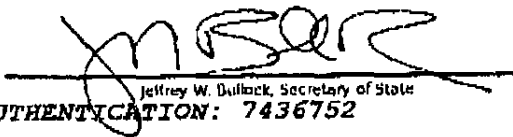
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Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 7436752

DATE: 07-23-09