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2010 JUN 25 P 4: 23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2010 JUN 30 P 4: 17
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TALLAHASSEE, FLORIDA

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COVER LETTER

FILED
2003 JUN 25 P 4:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TO: New Filing Section
Division of Corporations

SUBJECT: BIREB, INC.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

DEIDRE FOUZAN
(Name of Person)
BIREB, INC.
(Firm/Company)
2611 COMMERCE WAY
(Address)
WSTA, GA 30281
(City/State and Zip code)

For further information concerning this matter, please call:

DEIDRE FOUZAN at (706) 597-5801
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

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. BREG, 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. CALIFORNIA 3. 33-0361048
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 3/15/89 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 5/1/94
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 2611 COMMERCIAL WAY VISTA, CA 92081
(Principal office address)

SAME
(Current mailing address)

8. Sales of medical devices & 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: NRAI SERVICES, INC.

Office Address: 2731 EXECUTIVE PARKWAY, STE A
WESTON, Florida 33331
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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.

NRAI Services, Inc.

By: Matt Thompson Matt Thompson, 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.

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

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. William R. Hopson _____

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

14. William R. HOPSON, CEO _____

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

SEE
ATTACHED

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200 JUN 25 P 4: 23
SECRETARY OF STATE
MILWAUKEE, WIS.

PERSONAL INFORMATION ON BREG, INC.

DIRECTOR:

Alan W. Milinazzo (Director of Breg, Inc.)
Orthofix NV
800 Boylston Street, 15th Floor
Boston, MA 02199

Home Address:
144 West Newton St.
Boston, MA 02118

OFFICERS:

Alan W. Milinazzo, CEO
Home Address:
144 West Newton St.
Boston, MA 02118

Bradford A. Lee, President
Home Address:
8080 Paseo Arrayan
Carlsbad, CA 92009

William R. Hopson, CFO
Home Address:
3251 Piragua Street
Carlsbad, CA 92009

Brian McCollum, Treasurer
Home Address:
95 Manatee Road,
Hingham, MA 02043

Robert Vaters, Assistant Treasurer
Home Address:
63 Coniston Road
Short Hills, NJ 07078

Jeffrey Schumm, Secretary
Home Address:
8917 Pennyhill Drive
Huntersville, NC 28078

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TALLAHASSEE, FLORIDA

State of California
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

BREG, INC.

FILE NUMBER: C1G35882
FORMATION DATE: 03/15/1989
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

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SECRETARY OF STATE
SACRAMENTO, CALIFORNIA

I, DEBRA BOWEN, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of June 08, 2010.

Debra Bowen

DEBRA BOWEN
Secretary of State