

**F12000001293**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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(((H12000070884 3)))



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To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : C T CORPORATION SYSTEM  
Account Number : PCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5368

RE-SUBMIT  
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TALLAHASSEE, FLORIDA

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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

**FOREIGN PROFIT/NONPROFIT CORPORATION**  
**DePuy Spine Holding Corporation**

Certificate of Status	0
Certified Copy	0
Page Count	087
Estimated Charge	\$70.00

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J. Shivers MAR 27 2012

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Corporate Filing Menu

Help



March 20, 2012

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CT

SUBJECT: DEPUY SPINE HOLDING CORPORATION  
REF: W12000015819

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please list the officers/directors on page 2.,

If you have any further questions concerning your document, please call (850) 245-6052.

Justin M Shivers  
Regulatory Specialist II  
New Filing Section

FAX Aud. #: H12000070884  
Letter Number: 412A00009685

**\*RE-SUBMIT\***  
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date of submission 3/19

P.O BOX 6327 - Tallahassee, Florida 32314

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** DePuy Spine Holding Corporation

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," or "Certificate of Good Standing" 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:

Name of Person

DePuy Spine Holding Corporation

Firm/Company

Address

City/State and Zip code

J.Jackson4@its.jnj.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James Jackson

at ( 732 ) 524 3347

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

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TALLAHASSEE, FL 32301

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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. DePuy Spine Holding Corporation**

(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. Massachusetts**

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

**3. 35-2114686**

(FEI number, if applicable)

**4. 06/29/2000**

(Date of incorporation)

**5. Perpetual**

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

**6. Upon filing**

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

**7. 325 Paramount Drive, Raynham, Massachusetts 02 767**

(Principal office address)

**325 Paramount Drive, Raynham, Massachusetts 02 767**

(Current mailing address)

**8. Management of Spinal Product Sales & Distributions.**

(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**, 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.*

**CT Corporation System**

By:

Connie Bryan  
(Registered agent's signature)

**Connie Bryan**  
**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.**

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

**A. DIRECTORS**

Chairman: Ses attached Sch. A

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

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. John F. Sharkey, Assistant Secretary

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

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TALLAHASSEE FL 32310

## DePuy Spine Holding Corporation

Date 03/26/2012

## Current Elections / Appointments

**Board Positions**

Name	Position	Appointed	Job Title	Appt. Grp.	Status	Reminder	Att.
Batesko III, Peter	Director	06/01/2006		Directors		<input checked="" type="checkbox"/>	
Lenard, Eric L	Director	10/03/2011		Directors		<input checked="" type="checkbox"/>	
Nawana, Namal Sasrika	Director	03/04/2011		Directors		<input checked="" type="checkbox"/>	

**Officers**

Name	Position	Appointed	Job Title	Appt. Grp.	Status	Reminder	Att.
Nawana, Namal Sasrika	President	03/04/2011	President	Directors		<input checked="" type="checkbox"/>	
Bates, Lance Gerald	Vice President	02/01/2011	Vice President, US Sales	Officers		<input checked="" type="checkbox"/>	
Reinhardt, Max	Vice President	02/01/2011	Vice President, Marketing	Officers		<input checked="" type="checkbox"/>	
Christianson, William	Vice President	06/29/2004	Vice President	Officers		<input checked="" type="checkbox"/>	
Batesko III, Peter	Treasurer	06/01/2006	Treasurer	Officers		<input checked="" type="checkbox"/>	
Lenard, Eric L	Assistant Treasurer	10/03/2011	Assistant Treasurer	Directors		<input checked="" type="checkbox"/>	
Maloblocki, Gregory	Clerk	02/01/2005	Clerk	Officers		<input checked="" type="checkbox"/>	
Chia, Douglas K	Assistant Clerk	06/29/2005	Assistant Clerk	Officers		<input checked="" type="checkbox"/>	
Moore, Monte B	Assistant Clerk	06/29/2000	Assistant Clerk	Officers		<input checked="" type="checkbox"/>	
Reilly, Michael P	Assistant Clerk	06/29/2005	Assistant Clerk	Officers		<input checked="" type="checkbox"/>	
Sharkey, John F	Assistant Clerk	06/29/2005	Assistant Clerk	Officers		<input checked="" type="checkbox"/>	

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William Francis Galvin  
Secretary of the  
Commonwealth

*The Commonwealth of Massachusetts*  
*Secretary of the Commonwealth*  
*State House, Boston, Massachusetts 02133*

Date: March 14, 2012

To Whom It May Concern :

I hereby certify that according to the records of this office,

**DEPUY SPINE HOLDING CORPORATION**

is a domestic corporation organized on **June 29, 2000** , under the General Laws of the Commonwealth of Massachusetts. I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



In testimony of which,  
I have hereunto affixed the  
Great Seal of the Commonwealth  
on the date first above written.

*William Francis Galvin*

Secretary of the Commonwealth

Certificate Number: 12036515490

Verify this Certificate at: <http://corp.sec.state.ma.us/corp/Certificates/Verify.asp>

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TALLAHASSEE, FLORIDA

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