Division of Corporations **Electronic Filing Cover Sheet** 

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(((H13000212273 3)))



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: (850)878-5368

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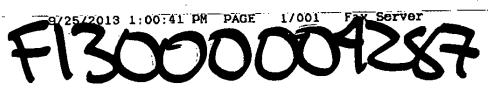
## FOREIGN PROFIT/NONPROFIT CORPORATION C. R. BARD, INC.

Certificate of Status	0
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Corporate Filing Ment ( ) (Help) ( ) 4/24

850-617-6381





September 25, 2013

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: C.R. BARD, INC.

REF: W13000053305

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.

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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Maryanne Dickey Regulatory Specialist II New Filing Section FAX Aud. #: H13000212273 Letter Number: 713A00022528

\*RE-SUBMIT\*
Fleace reisin original filing
daily of submission <u>aprt</u>

PECEIVED 34.30CT-2 MM 94.

## **COVER LETTER**

TO: New Filing Section Division of Corporations	
SUBJECT: C. R. Bard, Inc.	
Name of corporation - must include ruffix	
Dear Sir or Medam:	
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:	
Myra McGinlay	
* Name of Person	
C. R. Bard, Inc.	
Pirm/Company	
730 Central Avenue	
Address	
Murray Hill, NJ 07974	
City/State and Zip code	
christine.sibnm@crbard.com	
B-mail address: (to be used for future annual report notification)	,
For further information concerning this matter, please call:	3 SEP
Myra McGlinley 908 277-8277	P 24
Name of Person Area Code & Daytime Telephone Number	
رياليا. تاليا	
STREET/COURIER ADDRESS: MAILING ADDRESS: New Filing Section New Filing Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314	2: 27
Taliahassee, FL 32301	
Enclosed is a check for the following amount:	
© \$70.00 Filing Fee □ \$78.75 Filing Fee & □ \$87.50 Filing Fee,  Certificate of Status Certified Copy Cartified Copy  Cartified Copy	

### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTIES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

	orporation; must include "INCORPORAT orp," "Imo," "Co," or "Corp.")	ED," "COMPANY," "CORPORATION,"	<del></del>
11104 004 0	0.7, 1.14, CO, C. CO.P.,		
(If name unavail	able in Piorida, enter alternate corporate na	ame adopted for the purpose of transacting business in Pla	rida)
New Jersey		3, 22-1454160	
·	under the law of which it is incorporated)	(FEI cumber, if applicable)	
02/08/1972		5. Perpetual	
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetu	al <sup>#</sup> }
01/01/2010		•	
		ess in Florida, if prior to registration) 97.1502, F.S., to determine penalty liability)	<del> </del>
C. R. Bard, Inc.,	730 Central Avenue, Murray Hill, NJ 0797	74	
•	(Principal office	address)	
1 ( 1 (-(7)-)			
Mym McGmiey,	C. R. Bard, Inc., 730 Contral Avenue, Mu	rray Hill, NJ 07974	
Myra McConley,	C. R. Bard, Inc., 730 Contral Avenue, Mu (Current malling		
	(Current malling	address)	<del></del>
	(Current malling		
Dosign, manufa	(Current malling ture, packaging distribution and sale of m	address)	<u> </u>
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Dosign, manufa (Purpose(s	(Current malling ture, packaging distribution and sale of m	address)  address, surgical, diagnostic and patient care devices.  ar country to be carried out in state of Florida)	SEP .
Design, manufa (Purpose(s	(Current malling cture, packaging distribution and sale of m ) of corporation authorized in home state of gardense of Florida registered agent:  CT Corporation System	address)  address, surgical, diagnostic and patient care devices.  ar country to be carried out in state of Florida)	
Design, manufa (Purpose(s	(Current malling ture, packaging distribution and sale of m ) of corporation authorized in home state of address of Florida registered agent:	address)  address, surgical, diagnostic and patient care devices.  ar country to be carried out in state of Florida)	SEP 24
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Dosign, manufa (Purpose(s , Name and street	(Current mailing cture, paskaging distribution and sale of m of corporation authorized in home state of address of Florida registered agent:  CT Corporation System  1200 South Pine Island Road	address)  address, surgical, diagnostic and patient care devices.  ar country to be carried out in state of Florida)  (P.O. Box NOT acceptable)	SEP 24 PM
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Design, manufe (Purpose) Name and sires Name; Office Address;	(Current malling cture, packaging distribution and sale of m of corporation authorized in home state of a address of Florida registered agent:  CT Corporation System  1200 South Pine Island Road  Plantation  (City)	edical, surgical, diagnostic and pattent care devices.  or country to be carried out in state of Florida)  (P.O. Box NOT acceptable)  7. Florida 33324  (Zip code)	SEP 24 PH 2: 27
Doelgn, manufe (Purpose(e Name; Name; Office Address; O. Registered as Javing been name	(Current malling chure, paskaging distribution and sale of malling) of corporation authorized in home state of a address of Florida registered agent:  CT Corporation System  1200 South Pine Island Road  Plantation  (City)  (ent's acceptance:  ed as registered agent and to accept sea application, I hereby accept the appoint	edical, surgical, diagnostic and pattent care devices.  or country to be carried out in state of Florida)  (P.O. Box NOT acceptable)  Florida  (Zip code)  Gruces of process for the above stated corporation as intruent as registered agent and agree to act in this	SEP 24 PH 2: 27 Cathe place of the place of
Dosign, manufe (Purpose(s) Name and give Name: Office Address; O. Registered as faving been name esignated in this inther agrees to co	(Current mailing cture, paskaging distribution and sale of mail of corporation authorized in home state of a address of Florida registered agent:  CT Corporation System  1200 South Pine Island Road  Plantation  (City)  tent's acceptance:  ed as registered agent and to accept sea application. I hereby accept the appoint of all status.	edical, surgical, diagnostic and patient care devices.  Trecountry to be carried out in state of Florida)  (P.O. Box NOT acceptable)  Florida  (Zip code)  Florida  (Zip code)  Florida above stated corporation at inturent as registered agent and agree to act in this as relative to the proper and complete performance	SEP 24 PH 2: 27 Cathe place of the place of
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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: See attached		·,	
Address:			
Vice Chairman:			
Address:			
Adultsi.			
Director:	<del></del>	<del></del>	
Address:			
· · · · · · · · · · · · · · · · · · ·			
Director:			
Address:			
B. OFFICERS			
President: See attached	TA <sub>S</sub>	<u> </u>	
Address:	CR CR	SE	
	A N	<del>- 8</del> -	
Vice Presidents	3S. YY	-	F''-
Vice President:	بير الم	ř	
Address:	- S. X.	छ	1,,,,,
	<del>D</del> m	47	
Secretary:			
Address:	<del></del>		
Treasurer:			
Address:			
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or of	lirectors.		
13. July			
Eignature of Director or Officer  The officer or director signing this document (and who is listed in number 12 above) affirms that the fac	sta stated he	rein	
are true and that he or she is aware that false information submitted in a document to the Department of a third degree follony as provided for in s.817.155, F.S.	State consti	itutes	
14. Richard C. Rosenzweig, Vice President, Law & Assistant Secretary			
(Typed or printed name and capacity of person signing application)			

## **Question 12**

# C.R. Bard, Inc.

## **Directors**

Name	Title
Barrett, David M.	Director
Breslawsky, Marc C.	Director
Henkel, Herbert L.	Director
Kelly, John C.	Director
Naughton, Gail K. Ph.D.	Director
Ring, Timothy M.	Director
Thompson, Tommy G.	Director
Weiland, John H.	Director
Welters, Anthony	Director
White, Tony L.	Director

## Officers

Name	Title
Ring, Timothy M.	Chairman & Chief Executive Officer
Weiland, John H.	President & Chief Operating Officer
Holland, Christopher S.	Senior Vice President & Chief Financial Officer
Beasley, Jim C.	Group President
Collins, Timothy P.	Group President

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SECRETARY OF STATE

Group Vice President
Group Vice President
Group Vice President
Senior Vice President - Science, Technology &
Senior Vice President - Quality, Regulatory &
Vice President - Quality Assurance
Vice President - Regulatory Affairs
Vice President - Investor Relations
Vice President, General Counsel & Secretary
Vice President - Human Resources
Vice President & Treasurer
Vice President & Controller
Vice President, Law & Assistant Secretary
Vice President - Information Technology

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

# STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

#### C. R. BARD, INC.

3295202100

With the Previous or Alternate Name

BARDSHELL, INC. (Previous Name)

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on February 8, 1972.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Jean F. Holloway 730 Central Avenue Murray Hill, NJ 07974

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 20th day of September, 2013

SEP 24 PH 2: 2:

THE STATE OF THE S

Certification# 129648350

Andrew P Sidamon-Eristoff
State Treasurer

Verify this certificate at https://www.l.state.nj.us/TYTR StandingCert/JSP/Verify Cert.jsp