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Office Use Only

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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

13 NOV 27 PH 1:52

November 27, 2013

CORPORATION SERVICE COMPANY WALK-IN ATTN: HARRY B. DAVIS

SUBJECT: ENDOLOGIX, INC. Ref. Number: W13000065396

Please give original submission date as file date.

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

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$650.00.

Please return the corrected original and one copy of 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) 245-6052.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 113A00027290

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ION SERVICE COMPANY.						
ACCOUNT NO. : 12000000195						
REFERENCE : 898991 4324989						
AUTHORIZATION :						
AUTHORIZATION : Spelle de mar						
ORDER DATE: November 26, 2013						
ORDER TIME: 1:44 PM						
ORDER NO. : 898991-050						
CUSTOMER NO: 4324989						
FOREIGN FILINGS						
NAME: ENDOLOGIX, INC.						
XXXX QUALIFICATION (TYPE: CO)						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY  XX PLAIN STAMPED COPY  XX CERTIFICATE OF GOOD STANDING						
CONTACT PERSON: Harry B. Davis EXT# 2926						
EXAMINER:						

#### **COVER LETTER**

	v Filing Section ision of Corporations		
SUBJECT:	Endologix, Inc.		
SOBJECT.	•	ion - must include suffix	
Dear Sir or N	Madam:		
"Certificate of	d "Application by Foreign Corporation of Existence," or "Certificate of Good Sinced foreign corporation to transact bus	Standing" and check are submit	
Please return	n all correspondence concerning this ma	tter to the following:	
Brittany	y Nash		
	Name	of Person	
Stradlin	ng Yocca Carlson & Rai	uth, P.C.	
		Company	
660 Ne	wport Center Drive, Su	ite 1600	
Newpoi	rt Beach, CA 92660	ldress	
	City/Stat	e and Zip code	
Sthunen	n@endologix.com		
	E-mail address: (to be use	ed for future annual report noti	fication)
For further in	nformation concerning this matter, pleas	se call:	
Brittany Nash		<sub>)</sub> 725-4050	
Nan	me of Person Are	ea Code & Daytime Telephone	Number
New Divis Clift 2661	REET/COURIER ADDRESS: / Filing Section /	MAILING ADD New Filing Section Division of Corpo P.O. Box 6327 Tallahassee, FL	on orations
Enclosed is a	a check for the following amount:		
□ \$70.00 Fi	iling Fee \$\pi\$ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	3 \$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.

I. Endologix, Inc			
	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORA	.TION,"
(If name unavaila	able in Florida, enter alternate corporate name a	adopted for the purpose of tran	sacting business in Florida)
Delaware 2.	2	Applied for	
	under the law of which it is incorporated)	(FEI number, i	f applicable)
06/02/1993	5.	Perpetual	
·	of incorporation)	(Duration: Year corp. will ce	ease to exist or "perpetual")
	(Date first transacted business in		
11 Studebaker,	(SEE SECTIONS 607.1501 & 607.15 Irvine, CA 92618	02, F.S., to determine penalty	nability)
11 Studebaker,	(Principal office addr Irvine, CA 92618	ess)	
	(Current mailing addr	ess)	
Medical device			
(Purpose(s	) of corporation authorized in home state or cou	antry to be carried out in state	of Florida) .
. Name and stree	t address of Florida registered agent: (P.C	D. Box <u>NOT</u> acceptable)	₽£ <b>ಪ</b>
Name:	Corporation Service Company		
Office Address:	1201 Hays Street		126 125 1255
	Tallahassee	, Florida	
	(City)	(Zip code)	8: 2 SIM SIM
Having been nam lesignated in this urther agree to co luties, and I am f	gent's acceptance:  ed as registered agent and to accept service application, I hereby accept the appointn omply with the provisions of all statutes re amiliar with and accept the obligations of Corporation Service Company	nent as registered agent an elative to the proper and co my position as registered	d agree to act in this capacity. It complete performance of my
В	y: He	my Blins	Harry B. Deve Asst. Vice President
	(Registered agent's sig	gnature)	

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 Attachment A] Address: \_\_ Vice Chairman: Address: Director: \_\_\_ Address: Address: **B. OFFICERS** President: \_ [See Attachment A] Address: Vice President: Address: \_ Secretary: \_ Address: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

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. Shelley B. Thunen, Chief Financial Officer

#### ATTACHMENT A

#### Directors

Name	Address
John McDermott	11 Studebaker, Irvine, CA 92618
Daniel Lemaitre	11 Studebaker, Irvine, CA 92618
Guido Neels	11 Studebaker, Irvine, CA 92618
Gregory Waller	11 Studebaker, Irvine, CA 92618
Thomas Wilder	11 Studebaker, Irvine, CA 92618
Thomas Zenty	11 Studebaker, Irvine, CA 92618

#### Officers

Name	Title	Address
John McDermott	President and Chief Executive Officer	11 Studebaker, Irvine, CA 92618
Todd Abraham	Vice President, Operations	11 Studebaker, Irvine, CA 92618
Joseph A. deJohn	Vice President, Sales	11 Studebaker, Irvine, CA 92618
Janet M. Fauls	Vice President, Regulatory	11 Studebaker, Irvine, CA 92618
Charles Love	Vice President, Clinical Affairs	11 Studebaker, Irvine, CA 92618
Ruth Lyons	Vice President, Global Marketing	11 Studebaker, Irvine, CA 92618
Robert D. Mitchell	President, International	11 Studebaker, Irvine, CA 92618
Shelley B. Thunen	Chief Financial Officer and Secretary	11 Studebaker, Irvine, CA 92618

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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 "ENDOLOGIX, 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-SIXTH DAY OF

NOVEMBER, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ENDOLOGIX, INC." WAS INCORPORATED ON THE SECOND DAY OF JUNE, A.D. 1993.

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

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

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Jeffrey W Bullock, Secretary of State AUTHENTYCATION: 0928498

DATE: 11-26-13

You may verify this certificate online at corp.delaware.gov/authver.shtml