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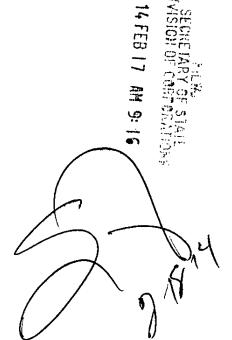
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Margaret T. Lund 1200 North Mayfair Road Suite 430 Milwaukee, WI 53226-3282 mtlund@staffordlaw.com 414,982,2871

February 14, 2014

Via Federal Express

Florida Department of State New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: Tarsus Cardio Inc.

Enclosed are the following:

- 1. Your official Cover Letter.
- 2. Application by Foreign Corporation for Authorization to Transact Business in Florida (original and copy).
- 3. Certificate of Good Standing from Wisconsin Department of Financial Institutions. This Certificate may be authenticated at website http://www.wdfi.org/apps/ccs/verify/.com, by entering this code: 132520-4F997D22.
- 4. Check in the amount of \$78.75 for the filing fee and Certificate of Status.

Please process the above Application and file stamp and return the copy in the enclosed envelope. Please call if you have any questions or require any additional information. Thank you.

Very truly yours,

Margaret T. Lund

MTL:jlm Enclosures

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Madison Office

222 West Washington Avenue P.O. Box 1784 Madison, Wisconsin 53701-1784 608.256.0226 888.655.4752 Fax 608.259.2600 www.staffordlaw.com Milwaukee Office

1200 North Mayfair Road Suite 430 Milwaukee, Wisconsin

53226-3282

414.982.2850 888.655.4752 Fax 414.982.2889 www.staffordlaw.com

COVER LETTER

TO:	New Filing Section Division of Corporations		,
SÙBJ	ECT: Tarsus Cardio Inc.		
5-2-0		tion - must include suffix	
Dear S	ir or Madam:		
"Certif	closed "Application by Foreign Corporation ficate of Existence," or "Certificate of Good referenced foreign corporation to transact bu	Standing" and check are submi	
Please	return all correspondence concerning this ma	atter to the following:	
Mar	garet T. Lund		
		e of Person	
Sta	fford Rosenbaum LLP	ware # 107 0 ' d .	and the second s
<u> </u>	Firm/0	Company	
120	0 North Mayfair Road Suit		
	*	ddress	
Milv	vaukee, WI 53226	en e	_
#	City/Sta	ate and Zip code	
mtlu	ind@staffordlaw.com		
's' Immittan	E-mail address: (to be u	sed for future annual report no	tification)
For fu	rther information concerning this matter, ple	ase call:	
Mai	rgaret T. Lund	4 982-2871	
	Name of Person A	rea Code & Daytime Telephon	ne Number
	STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING AD New Filing Sect Division of Corp P.O. Box 6327 Tallahassee, FL	ion porations
Enclo	sed is a check for the following amount:		
□ \$7	0.00 Filing Fee \$\(\mathbb{S} \) \$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

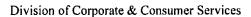
_. Tarsus C		7
(Enter name of co	rporation; must include "INCORPORATEI rp," "Inc," "Co," or "Corp.")	
		ne adopted for the purpose of transacting business in Florida)
Wisconsi		3. 70 70 70 170
(State or country to 1/14/2014	ander the law of which it is incorporated)	(FEI number, if applicable) 5 Perpetual
• •	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
1801 N. M	· · · · · · · · · · · · · · · · · · ·	s in Florida, if prior to registration) 1502, F.S., to determine penalty liability)
. 100114.14	(Principal office a	
1801 N M	ilitary Trail Suite 200, Boo	
	(Current mailing a	
		a organized under the Florida Business Corporation Act Chap. 807 Florida Statutes.
(Purpose(s) of corporation authorized in home state or	country to be carried out in state of Florida)
. Name and stree	t address of Florida registered agent: (P.O. Box NOT acceptable)
Name:	Andrew Sherman	
Office Address:	1801 N. Military Trail, Suite	e 200
	Boca Raton	Florida 33431 (Zip code)
	(City)	(Zip code)
Having been nan lesignated in this further agree to c	application, I hereby accept the appoi	ervice of process for the above stated corporation at the place intment as registered agent and agree to act in this capacity. I es relative to the proper and complete performance of my is of my position as registered agent.
euttes, unu 1 um j	(Registered agent	's signature)
11. Attached is a	certificate of existence duly authentical	's signature) ted, not more than 90 days prior to delivery of this application to reficial 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:

United States of America State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS





To All to Whom These Presents Shall Come, Greeting:

I, GEORGE PETAK, Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

TARSUS CARDIO INC.

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is January 14, 2014.

I further certify that said corporation or limited liability company has not yet completed its initial report year and, accordingly, has not yet filed an annual report under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that said corporation or limited liability company has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on February 12, 2014.

Paul M. Holam

PAUL M. HOLZEM, Administrator Division of Corporate and Consumer Services Department of Financial Institutions

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.

DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: http://www.wdfi.org/apps/ccs/verify/

Enter this code:

132520-4F997D22