(Requ	estor's Name))
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04/23/14--01023--005 **75.00

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.

(11 name unavail	able in Florida, enter alternate corporate name as	dopted for the purpose of transacting business in Flo	orida)
Delaware	e	20-5090902	
State or country	under the law of which it is incorporated)	(FEI number, if applicable)	
June 16,	2006	Perpetual	
(Date	e of incorporation)	(Duration: Year corp. will cease to exist or "perpet	ual")
Not appli	cable.		
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150		
500 Cumi	mings Center #3500, Bever		
	(Principal office addre	·	
500 Cumr	nings Center #3500, Beverly	<u>.</u> .	
	(Current mailing addre	ess)	<u> </u>
Manufac	turer of medical devices an	d technologies.	AP
	s) of corporation authorized in home state or cou		APR 23
Name and stree	et address of Florida registered agent: (P.O.	. Box NOT acceptable)	
	Eric M. Sauerberg, Esq.	. 2011 <u></u>	AMİI: 55
Name:			: ن
ice Address:	200 Village Square Crossing #1	02	2
	Palm Beach Gardens	, Florida 33410	

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.

(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: Kingsley R. Chin, M.D. Address: 500 Cummings Center #3500 Beverly, MA 01915 Vice Chairman: Address: **B. OFFICERS** President: Kingsley R. Chin, M.D., Chief Executive Officer Address: 500 Cummings Center, #3500 Beverly, MA 01915 Vice President: Secretary: ___ Treasurer: 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. Kingsley R. Chin, M.D. CP

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

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SPINEFRONTIER, 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-FIRST DAY OF APRIL, A.D. 2014.



Jeffrey W. Bullock, Secretary of State

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AUTHENTICATION: 1306803

DATE: 04-21-14