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JUN 20 2013 J. BRUCE CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE: 182978 AUTHORIZATION COST LIMIT ORDER DATE: June 16, 2016 ORDER TIME : 1:31 PM ORDER NO. : 182978-265 CUSTOMER NO: 4308005 FOREIGN FILINGS NAME: DRAEGER MEDICAL SYSTEMS, INC. XXXX QUALIFICATION (TYPE: CO) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY _ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Courtney Williams -- EXT# 62935

COVER LETTER

	stration Section ion of Corporations			
	Draeger Medical Systems, Inc.			
SUBJECT:	Name of	corporation	- must include suffix	
Dear Sir or M	adam:			
"Certificate of	"Application by Foreign Corp f Existence," or "Certificate of ced foreign corporation to tran	f Good Stan	ding" and check are submi	
Please return Heather Papale	all correspondence concerning co	g this matter	to the following:	
		Name of P	erson	
Pepper Hamilto	on LLP			
		Firm/Com	pany	
3000 Two Log	an Square		•	
		Addre	SS	
Philadelphia, P	A 19103			
	(City/State an	d Zip code	
papaleoh@pep		•	•	
	E-mail address: (to be used fo	or future annual report noti	fication) AHA
For further inf	formation concerning this mat	ler inlease ca	11.	
	on the same same same same same same same sam	or, produce of	••••	SE CONTROL
Heather Papale		215	981-4787	
Name	of Person	Area Code	Daytime Telephon	
Regist Division Clifton 2661 I	ET/COURIER ADDRESS: tration Section on of Corporations in Building Executive Center Circle assee, FL 32301		MAILING ADD Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 3	ion orations
inclosed is a c	check for the following amoun	it:		
3 \$70.00 Fili	ng Fee S78.75 Filing F Certificate of S		\$78.75 Filing Fee & Certified Copy	1 \$87.50 Filing Fee, Certificate of Status &

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.

-	able in Florida, enter alternate corpo	orate name adopted for the purpose of transact	ing business in Florida)	
Delaware 2.		oporated) n/a (FEI number, if a	•	
(State or count	ry under the law of which it is incorp	porated) (FEI number, if a		
(Dat	e of incorporation)	5. (Date of duration, if other	er than perpetual)	
Upon filing 6.				
	(SEE SECTIONS 607.150	business in Florida, if prior to registration) 1 & 607.1502, F.S., to determine penalty liab	ility)	
7	nd, Telford, PA 18969			
		(Principal office address)		
	(Cu	rrent mailing address, if different)	••••	
	(00	trent maining address, it differently		-
8. Name and <u>stre</u>	·	gent: (P.O. Box NOT acceptable)	N T N N N N N N N N N N N N N N N N N N	
8. Name and <u>stre</u> Name:	·	•	T A P	
	et address of Florida registered a	•	IT A & 3: SSEE/FLORID	
Name:	et address of Florida registered a Corporation Service Company 1201 Hays Street Tallahassee	gent: (P.O. Box NOT acceptable) 32301	IT A &:	
Name:	et address of Florida registered a Corporation Service Company 1201 Hays Street Tallahassee	gent: (P.O. Box NOT acceptable)	IT A & 3: SSEE/FLORID	
Name: Office Address: Registered ag Having been nan designated in this	et address of Florida registered a Corporation Service Company 1201 Hays Street Tallahassee (City) ent's acceptance: and as registered agent and to accept the comply with the provisions of all	gent: (P.O. Box NOT acceptable) 32301	ted corporation at the pla gree to act in this capacit, lete performance of my	in the same of the
Name: Office Address: Registered ag Having been nan designated in this further agree to a duties, and I am	et address of Florida registered a Corporation Service Company 1201 Hays Street Tallahassee (City) ent's acceptance: and as registered agent and to accept the comply with the provisions of all	gent: (P.O. Box NOT acceptable) , Florida , Florida (Zip code) ccept service of process for the above state appointment as registered agent and age statutes relative to the proper and compligations of my position as registered agent	ted corporation at the pla gree to act in this capacit, lete performance of my	ace the I

10. 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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: _ Address: _ Vice Chairman: Address: _ Rainer Klug Director: 3135 Quarry Road Address; Telford, PA 18969 Director: Address: B. OFFICERS Lothar Thielen President: 3135 Quarry Road, Telford, PA 18969 Address: Larry Lombardo Vice President: 3135 Quarry Road, Telford, PA 18969 Address: Patrick Gilmore Secretary: 3135 Quarry Road, Telford, PA 18969 Address: Florian Kluge, CFO Treasurer: 3135 Quarry Road, Telford, PA 18969 Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 20/2016 Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 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. Patrick Gilmore, Secretary

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

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "DRAEGER MEDICAL SYSTEMS, 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 THIRTY-FIRST DAY OF MAY, A.D. 2016.

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

ANY'S COMMENT OF THE PARTY OF T

Authentication: 202407770

Date: 05-31-16

3644576 8300 SR# 20164118948

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