# F170000002796

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAłL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	·
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer.	
}		
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Office Use Only



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2017 JUN 20 AM 10: 50

D. SCOTT JUN 2 1 2017 CORPORATION SERVICE COMPANY 1201 Hays Street Tallbassee FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 691350 4731473

AUTHORIZATION : Spelle Company

COST LIMIT : (\$\frac{1}{7}.00'\).00

ORDER DATE: June 19, 2017

ORDER TIME : 9:22 AM

ORDER NO. : 691350-005

CUSTOMER NO: 4731473

#### FOREIGN FILINGS

NAME: KPR U.S., INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

17 JUN 20 M 9 20 S. COLLARY OF STATE

## **COVER LETTER**

TO: Registration S Division of Co					
KPR U.	•				
SUBJECT:		f cornoration	- must include suffix		
	rame of	Corporation	- must menude surm		
Dear Sir or Madam:					
	ce," or "Certificate of	of Good Stan	ding" and check are su	act Business in Florida," bmitted to register the	
Please return all corres	spondence concernin	g this matter	to the following:		
		Name of	Person		
Medtronic					
		Firm/Com	pany		
710 Medtronic Parkway					
		Addre	ess		
Minneapolis, MN 55432				هست ا	
		City/State as	nd Zip code	<u> </u>	
rs.corporatesecretary@n	nedtronic.com			生 生	T
	E-mail address:	(to be used f	or future annual report	notification) 岁言 3	T.
For further information	n concerning this ma	tter, please c	all:	[위역 [편약]	: 'c
Anne M. Ziebell	-	763	514-4000		٠ ب
Name of Person		Area Code	Daytime Telep	bhone Number	_
Registration Son Division of Con Clifton Buildin 2661 Executiv Tallahassee, F	orporations ag e Center Circle L 32301		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section Forporations 7	
Enclosed is a check for	r the following amou	int;			
□ \$70.00 Filing Fee	☐ \$78.75 Filing Certificate of		\$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certificate of Status &	ζ

# 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.

me., co., c	orp," "Inc," "Co," or "Corp.")		
(If name unavaila	able in Florida, enter alternate corporate name ado	pted for the purpose of transacting bu	siness in Florida)
Delaware	32	-0138874	
(State or country	y under the law of which it is incorporated)	(FEI number, if applica	ible)
December 13, 20	010		
(Date	of incorporation) 5	(Date of duration, if other than	perpetual)
upon filing			
	ive, Plymouth, Minnesota 55441	office address)	
	(Principal o	office address) ddress, if different)	-10: 1
- Application in	(Principal o	ddress, if different)	
- Angelgama.ig	(Principal o	ddress, if different)	1 Jul 20
Name and stree	(Principal of Current mailing a et address of Florida registered agent: (P.O. F	ddress, if different)	17 JUL 20 KI
Name and stree	(Principal of Current mailing a et address of Florida registered agent: (P.O. E	ddress, if different)	17 JUN 20 EN 3 CO

(Registered agent's signature)

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

Amanda Farrell- Asst. VP

Corporation Service Company

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: Philip J. Albert Director: 710 Medtronic Parkway, Minneapolis, MN 55432 Address: Martha Ha Director: 710 Medtronic Parkway, Minneapolis, MN 55432 Address: **B. OFFICERS** Steve Blazejewski President: 555 Long Wharf Drive, New Haven, CT 06511 Address: Philip J. Albert Vice President: 710 Medtronic Parkway, Minneapolis, MN 55432 Address: Bradley E. Lerman Secretary: \_ 710 Medtronic Parkway, Minneapolis, MN 55432 Address: \_ Treasurer: \_ Address: \_\_\_\_ NOTE: If necessary, you may attach an addengium 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 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. Anne M. Ziebell, Assistant Secretary

Page 1

# <u>Delaware</u>

### The First State

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

DELAWARE, DO HEREBY CERTIFY "KPR U.S., 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 NINETEENTH DAY OF JUNE, A.D. 2017.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "KPR U.S., INC."

WAS INCORPORATED ON THE THIRTEENTH DAY OF DECEMBER, A.D. 2010.

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





Authentication: 202735761

Date: 06-19-17

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