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Doing so will generate another cover sheet	•

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338

Fax Number

: (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

FOREIGN PROFIT/NONPROFIT CORPORATION

Silk Road Medical, Inc.

Certificate of Status	Ü
Certified Copy	0
Page Count	0.5
Estimated Charge	\$1,020.00

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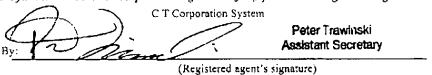
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

(If name unavail	able in Florida, enter alternate corporate name a	idented for the number of transacting his	iness in Florida)
DE	•	20-8777622	03 ;,, , 101142,
*	y under the law of which it is incorporated)	(FEI number, if applicab	ole)
03/21/2007	5.		
(Date	of incorporation)	(Date of duration, if other than p	perpetual)
12/12/2016			
1213 Innsbruck I	Drive, Sunnyvale, CA 94089 (Principa	al office address)	
	(Current mailin	g address, if different)	19 19 19 19 19 19 19 19 19 19 19 19 19 1
. Name and stree	et address of Florida registered agent: (P.O	. Box <u>NOT</u> acceptable)	FEB II
Name:	C T Corporation System		~~. ~~
ffice Address:	1200 South Pine Island Road		20 20
	Plantation	, Florida	5
	(City)	(Zip code)	**

9. 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.



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.

Chairma	Please see attached.	·
Address:		
Vice Cha	irman:	
Address:		
Director:		
Address:		
Director:		
Address:		9 HEB
B. OFF	ICERS	
	Erica Rogers	
Address:	1213 Innsbruck Drive, Sunnyvale, CA 94089	97.7 95.5 95.6
Vice Presi	dent:	
Address:	· · · · · · · · · · · · · · · · · · ·	
Secretary		
Address:		
Treasure	: Lucas Buchanan	
Address:	1213 Innsbruck Drive, Sunnyvale, CA 94089	
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/	or directors.
The offic	(Signature of State of Control of State of Control of State of Control of State of Control of State of	

2019-02-11 10:55:49 CST

11. Names and business addresses of officers and/or directors:

Silk Road Medical, Inc. Attachment List of Directors

Ruoxi Chen - Director Address: 1213 Innsbruck Dr., Sunnyvale, CA 94089

Tony Chou - Director Address: 1213 Innsbruck Dr., Sunnyvale, CA 94089

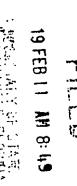
Jack Lasersohn - Director Address: 1213 Innsbruck Dr., Sunnyvale, CA 94089

Robert Mittendorff, MD - Director Address: 1213 Innsbruck Dr., Sunnyvale, CA 94089

Annette Rodriguez - Director Address: 1213 Innsbruck Dr., Sunnyvale, CA 94089

Elizabeth Weatherman - Director Address: 1213 Innsbruck Dr., Sunnyvale, CA 94089

Donald Zurbay - Director Address: 1213 Innsbruck Dr., Sunnyvale, CA 94089





Page 1

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

DELAWARE, DO HEREBY CERTIFY "SILK ROAD MEDICAL, 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 DECEMBER, A.D.

2018.

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

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

e at corp. delaware gov/auth

Authentication: 204204032

Date: 12-31-18