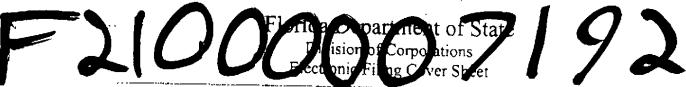
Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SPIEGEL & UTRERA, P.A.

Account Number : FCA00000001

Phone : (305)854-6000 Fax Number : (305)860-2076

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

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FOREIGN PROFIT/NONPROFIT CORPORATION HG ORTHOPEDICS CORP.

Certificate of Status	0
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Electronic Filing Menu Corporate Filing Menu

S. ROBERTS

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3058573700

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. HG ORTHOPEDICS CORP. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 87-3328382 (State or country under the law of which it is incorporated) (FEI number, if applicable) (Date of incorporation) Upon Filing (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 507.1502, F.S., to determine penalty liability) 10130 North Lake Boulevard, Suite 241-338, West Palm Beach, Florida 33412 (Principal office street address) 10130 North Lake Boulevard, Suite 241-338, West Palm Beach, Florida 33412 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) SPIEGEL & UTRERA, P.A. Name: 1840 SW 22nd Street, 4th Floor Office Address:

9. Registered agent's acceptance:

Miami

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.

_, Florida 33145

SPIEFEL Q UTRERA, P.A. NATALIA UTRENA VICE- PRESIDENT

(City)

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.

H21000455943 3

A. DIRECTORS

□ Chairman	Name:	C) Chairman	N		
□ Vice Chairman	Address: 10130 North Lake Boulevard	□Vice Chairman	Name:		
■ Director	Suite 214-338	☐ Director	Address:		
☐ President	West Palm Beach, FL 33412	□ President			
□Vice President		□ Vice President			
Secretary	☐ Treasurer	□ Secretary	□ Treasurer		
Other	Other	□Other			
□Chairman	Name:	□ Chairman	Name:		
□Vice Chairmaл	Address:	□Vice Chairman	Address:		
Director		□ Director			
☐ President		□ President			
□Vice President		□Vice President			
Secretary	□Treastuct	Sccretary	□Тгенешег		
☐ Other	Other	□Other	□Other		
_	Name:		Name:		
	Address:	□Vice Chairman	Address:		
Director		☐ Director			
President		☐ President			
□Vice President _		☐ Vice President			
☐ Secretary	☐ Treasurer	Secretary	□ Treasurer		
☐Other	Other	□Other	[]Other		
	se an attachment to report more than six (6). The attace dded to the index when filing your Florida Department of the file of the state	исос запе Аплиат Кер	ort torm,		
Signature of Director or Officer					
The officer or directo	er eleminer this decommend of the territory				

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 fellow as provided for in s.817,155, F.S.

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "RG ORTHOPEDICS CORP." 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 FIFTH DAY OF NOVEMBER, A.D. 2021.

6345627 8300

SR# 20213715557

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

MSEC,

Authentication: 204618437

Date: 11-05-21