

# F9600000 4416

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August 21, 1996

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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-08/27/96--01145--006  
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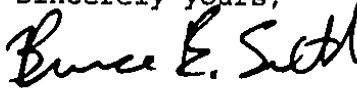
Re: Surgical Implants, Inc.

Gentlemen:

Enclosed is an Application by Foreign Corporation for Authorization to Transact Business in Florida for Surgical Implants, Inc., an Indiana corporation, together with a Certificate of Existence for this corporation issued by the Secretary of State of Indiana and a check in the amount of \$70.00 for the filing fee and registered agent designation.

Please return the letter of acknowledgement of qualification in the enclosed self-addressed, postage prepaid envelope.

Sincerely yours,



Bruce E. Smith

BES:co  
enclosures

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DIVISION OF CORPORATIONS  
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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:

1. SURGICAL IMPLANTS, INC.  
(Name of corporation: the word "INCORPORATED," "COMPANY," or "CORPORATION" or words or abbreviations of like import in language, as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Indiana  
(State or country under the law of which it is incorporated)
3. 2/16/89 4. Perpetual  
(Date of Incorporation) (Duration)
5. 35-1763422  
(Federal Employer Identification number, if applicable)
6. August 29, 1996  
(Date first transacted business in Florida. See sections 607.1501, 607.1502, and 817.155.)
7. 3700 S. Tamiami Trail #240, Sarasota, Florida 34239-6015  
(Current mailing address)
8. Consulting and selling of Joint Replacements  
(Corporate purpose and nature of business in which it is engaged in Florida)

9. Names and addresses of officers and or directors:

**A. Directors:**

Chairman: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Director: Douglas W. Stuart  
Address: 3700 S. Tamiami Trail #240  
Sarasota, Florida 34239-6015

Director: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

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**B. Officers:**

President: Douglas W. Stuart  
Address: 3700 S. Tamiami Trail #240  
Sarasota, Florida 34239-6015

Vice President: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: Douglas W. Stuart  
Address: 3700 S. Tamiami Trail #240  
Sarasota, Florida 34239-6015

Treasurer: Douglas W. Stuart  
Address: 3700 S. Tamiami Trail #240  
Sarasota, Florida 34239-6015

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(If needed, you may attach an addendum to the application listing additional officers and/or directors.)

**10. Name and Street address of Florida registered agent:**

Name: Douglas W. Stuart  
Office Address: 3700 Tamiami Trail #240  
Sarasota, Florida 34239-6015  
Zip Code

**11. 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: DW Stuart

12. 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.

13. DW Stuart  
(Signature of Chairman, Vice Chairman, or any officer listed in number 9 of the application)

14. Douglas W. Stuart, President  
(Name and capacity of person signing application)

STATE OF INDIANA  
OFFICE OF THE SECRETARY OF STATE

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, SUE ANNE GILROY, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

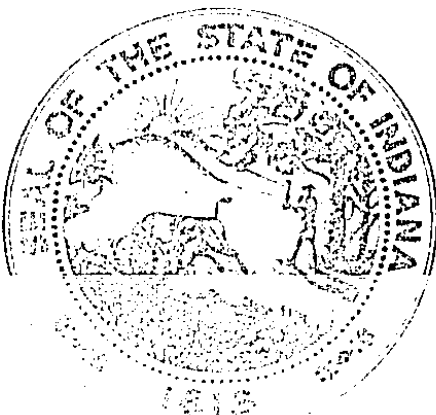
I further certify that records of this office disclose that

**SURGICAL IMPLANTS, INC.**

filed Articles of Incorporation on February 16, 1989, and is a corporation duly organized and existing under and by virtue of the laws of the State of Indiana.

I further certify this corporation has filed its most recent annual report required by Indiana law with the Secretary of State, or is not yet required to file such annual reports, and that Articles of Dissolution have not been filed.

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In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Nineteenth day of August, 1996.

*Sue Anne Gilroy*  
SUE ANNE GILROY, Secretary of State

*DH*  
Deputy