F9700006812

(Re	equestor's Name)			
(Address)				
(Ac	idress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL.		
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: May 10, 2018

Order#: 187070-014

Re: MEDTRONIC USA, INC.

Enclosed please find:

XX __ Change of Registered Agent and Office.

XX Check in the amount of \$35...

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ami Casper c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617 nge is submitted for a corporation o to change its registered office or re	organized under the la	ws of the State of <u>h</u>	Minnesota
1. The name of t	ne corporation: MEDTRONIC USA	, INC.		
2. The principal	office address: 710 Medtronic Park	way, LC300, Minnear	oolis, MN 55432	
3. The mailing a	ddress (if different):			
4. Date of incorp	oration/qualification: 12/23/1997	Document	number: F970000	006812
	street address of the current registe tment of State: (If resigned, enter re-		ed office on file wi	th the
	C T Corporation System			
	1200 South Pine Island Road			
	Plantation	FL	33324	
6. The name and (if changed):	street address of the new registered	agent (if changed) an	d /or registered off	ice di di
	Corporation Service Company			
	1201 Hays Street			
	P.O. Box Tallahassee	NOT acceptable	32301	
The street addre	ss of its registered office and the st be identical.	reet address of the bu	siness office of its	registered agent,
Such change wa authorized by th	s authorized by resolution duly add e board, or the corporation has bee	opted by its board of c n notified in writing o	lirectors or by an o of the change.	officer so
Xie	. E. agni	Jill Cilmi, Vice I		
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	e of an officer or director the appointment as registered ager o comply with the provisions of all my duties, and I am familiar with a s document is being filed merely to that the corporation has been notif	nt and agree to act in statutes relative to th and accept the obligat reflect a change in ti	ne proper and comp tion of my position he registered office	plete as registered
By: Cer	n Service Company	05/10/2018		
If signing on bel	lature of Registered Agent		Date	
	Asst. Vice President			
	ped or Printed Name			

* * * FILING FEE: \$35.00 * * *