

**798000000214**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850)617-6380

From: Account Name : C T CORPORATION SYSTEM  
Account Number : PCA000000023  
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Fax Number : (850)878-5368

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE  
MICRO THERAPEUTICS, INC.

Certificate of Status	0
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*RAH 8/5/10*

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: MICRO THERAPEUTICS, INC.  
Name of Corporation

DOCUMENT NUMBER: F98000000214

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cheryl L. Copeland-Lewis

Name of Contact Person

Covidien

Firm/Company

15 Hampshire Street

Address

Mansfield, MA 02048

City/State and Zip Code

cheryl.copeland@covidien.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cheryl L. Copeland-Lewis

Name of Contact Person

508

452-4311

at

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address:  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

CR2E045 (8/05)

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this  
statement of change is submitted for a corporation organized under the laws of the State of DELAWARE  
in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: MICRO THERAPEUTICS, INC.
2. The principal office address: 9775 TOLEDO WAY, IRVINE, CA 92618 US
3. The mailing address (if different): 3033 CAMPUS DRIVE, ATTN: LEGAL DEPT., PLYMOUTH, MN 55441 US
4. Date of incorporation/qualification: 01/13/1998 Document number: F98000000214
5. The name and street address of the current registered agent and registered office on file with the  
Florida Department of State: (If resigned, enter resigned)

CORPORATION SERVICE COMPANY

1201 HAYS STREET

TALLAHASSEE, FL 32301-2525 US

6. The name and street address of the new registered agent (if changed) and /or registered office  
(if changed):

C T Corporation System

c/o C T Corporation System, 1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

The street address of its registered office and the street address of the business office of its registered agent,  
as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so  
authorized by the board, or the corporation has been notified in writing of the change.

[Signature]  
Signature of an officer or director

JOHN W. KAPPLER, VICE PRESIDENT  
Printed or typed name and title

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 obligation of my position as registered agent. Or, if this  
document is being filed merely to reflect a change in the registered office address, I hereby confirm that the  
corporation has been notified in writing of this change.

By: C T Corporation System  
[Signature]  
Signature of Registered Agent

7/27/10  
Date

If signing on behalf of an entity:

CONVENTELETI  
[Signature]  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2ED45 (8/05)