

F98000003108

TRANSMITTAL LETTER

TO: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: Molnlycke Health Care, Inc

(Name of corporation - must include suffix)

Dear Sir or Madam:

200002504802--4

-04/23/98-01027--002

*****70.00 *****70.00

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Carolyn Homyak

(Name of Person)

Molnlycke Health Care, Inc.

(Firm/Company)

500 Baldwin Tower

(Address)

Eddystone, PA 19022

(City/State/Zip)

FILED
98 JUN -1 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Should you need to call someone concerning this matter, please call:

Michelle Latch

(Name of Person)

at (215) 963-8403

(Area Code & Daytime Telephone Number)

COURIER ADDRESS:

Qualification/Tax Lien Sec.
Division of Corporations
409 E. Gaines St
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

W98-9714
6/2/98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

April 30, 1998

CAROLYN HOMYAK
MOLNLYCKE HEALTH CARE, INC.
500 BALDWIN TOWER
EDDYSTONE, PA 19022

SUBJECT: MOLNLYCKE HEALTH CARE, INC.
Ref. Number: W98000009714

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for MOLNLYCKE HEALTH CARE, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6094.

Agnes Lunt
Document Specialist

Letter Number: 698A00023691



Coopers & Lybrand L.L.P.

a professional services firm

2400 Eleven Penn Center
Philadelphia, Pennsylvania
19103-2962

telephone (215) 963-8000

facsimile (215) 963-8700

April 14, 1998

Division of Corporations
Qualifications Tax Lien Section
P.O. Box 6327
Tallahassee, FL 32314

RE: Registration
Molnlycke Health Care, Inc.
FEIN 23-2945905

FILED
98 JUN -1 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dear Sir/Madam,

We have been engaged by Molnlycke Health Care, Inc. for the purpose of filing multiple state registrations. These filings are required for a new company which will be doing business in your state. Molnlycke Health Care, Inc. only has one corporate officer who serves as the President, Secretary and Treasurer of the corporation. Molnlycke Health Care Inc. will be employing at least one salesperson in your state for the purpose of wholesale distribution of wound care products. The products which they sell are not manufactured or stored in your state and will be shipped to the customers from out of state.

Enclosed please find a filing fee of \$70 and the following form:

Application by a Foreign Corporation for Authorization to Transact Business in Florida

If you should have any questions regarding the enclosed forms or require additional information please call me at (215)963-8403 or Donna Marie Daday at (215) 963 - 8059.

Thank You,

Michelle E. Latch
Tax Associate for
Coopers & Lybrand L.L.P.

Encl.

**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. Molnlycke Health Care, Inc

(Name of corporation: must include the word "INCORPORATED", "COMPANY", "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. Delaware

(State or country under the law of which it is incorporated)

3. 23-2945905

(FEI number, if applicable)

4. 12/19/97

(Date of Incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or
"perpetual")

6. 2/2/98

(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.05, 817.06, AND 817.07, F.S.))

7. 500 Baldwin Tower

Eddystone PA 19022

(Current mailing address)

8. Wholesale distribution of wound care products for resale

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. **Name and street address of Florida registered agent:** (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: United Corporate Services

Office Address: 801 N.E. 167th Street, Ste 300

North Miami Beach, , Florida, 33162

(Zip Code)

10. **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.

United Corporate Services, Inc.

By: Michael A. Barr

(Registered agent's signature)

Michael A. Barr, President

11. 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.

12. Names and addresses of officers and/or directors: (Street address **ONLY**- P. O. Box **NOT** acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: Bo Feltner

Address: SCA Molnlycke, S-405 03 Goteborg
Sweden

Vice Chairman: Vin Van Lokhorst

Address: SCA Molnlycke, S - 405 03 Goteborg
Sweden

Director: Sven-Olof Morgan Olsson

Address: AB Grundstenen 81217, c/o Nordic Capital Svenska AB
S-114 35 Stockholm, Sweden

Director:

Address:

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: Margo A Skinner

Address: 500 Baldwin Tower
Eddystone, PA 19022

Vice President:

Address:

Secretary: same as above

Address:

Treasurer: same as above

Address:

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. MARGO A. SKINNER, PRESIDENT
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8300 12179

RECEIVED
OFFICE OF THE SECRETARY OF STATE

98 APR 21 AM 9:39

KILLEB DARNELL
SECRETARY OF STATE

State of Delaware

PAGE 1

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MOLNLYCKE HEALTH CARE, 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 THIRD DAY OF APRIL, A.D. 1998.

FILED
98 JUN -1 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2835765 8300

981123456



Edward J. Freel

Edward J. Freel, Secretary of State
9011759

AUTHENTICATION:

04-03-98

DATE: