

F 99000002493

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

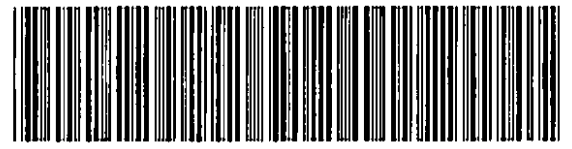
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

WALK In \$35.00

Office Use Only



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FILED
18 SEP 12 AM 12:00
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09/12/18--01012--003 **180.00

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SEP 13 2018

18 SEP 12 AM 11:31
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R/A

65

SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 9/12/2018

****WALK IN****

ENTITY NAME SORIN GROUP USA, INC.

DOCUMENT NUMBER F99000002495

****PLEASE FILE THE ATTACHED AND RETURN****

~~35.00~~

Plain Copy
Certified Copy
Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments
Certificate of Good Standing

****APOSTILLE' / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$35.00

CHECK # 5239

Please call Tina at the above number for any issues or concerns. Thank you so much!

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 DE in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: SORIN GROUP USA, INC.
- 2. The principal office address: 14401 W. 65th Way Arvada, CO 80004
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: 05/14/1999 Document number: F99000002495
- 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)

CT CORPORATION SYSTEM

1200 South Pine Island Road

Plantation, FL 33324

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

Universal Registered Agents, Inc.

1317 California Street

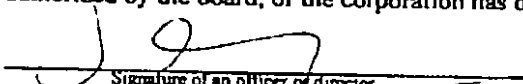
P.O. Box NOT acceptable

Tallahassee, FL 32304

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18 SEP 12 AM 12:00
TALLAHASSEE, FLORIDA
CORPORATION DIVISION

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

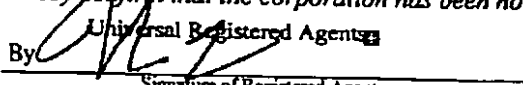
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

Joanne Caswell - Authorized Person

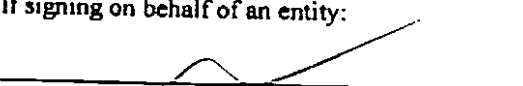
Printed or typed name and title

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 
Signature of Registered Agent

9/14/18
Date

If signing on behalf of an entity:


Typed or Printed Name

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

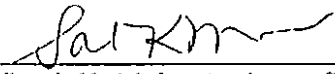
MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)

LIMITED POWER OF ATTORNEY

BE IT KNOWN, that Sarah K. Mohr, Assistant Secretary, of Sorin Group USA, Inc., has made and appointed, and by these presents does make and appoint Joanne Caswell of Continental Corporate Services, Inc. true and lawful attorney for her and in her name, place and stead, for the following specific and limited purposes of signing the documents required by the jurisdictions to change the registered agent and registered office for each of the entities on the attached list to Universal Registered Agents, Inc. Giving and granting said attorney, full power and authority to do and perform all and every act and thing whatsoever necessary to be done in and about the specific and limited premises (set out herein) as fully, to all intents and purposes, as might or could be done if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that said attorney shall lawfully do or cause to be done by virtue hereof.

IN WITNESS WHEREOF, I have hereunto set my hand this 30th day of August 2018




Sarah K. Mohr, Assistant Secretary

State of Texas

County of Harris

BEFORE ME, the undersigned authority, on this day personally appeared Taylor Pollock, known to me to be the person whose name is subscribed to the foregoing instrument, and acknowledged to me that he executed the same as Assistant Secretary for Sorin Group USA, Inc., on behalf of said Delaware corporation.

GIVEN UNDER MY HAND and seal of office this 30th day of August, 2018.



Notary Public
State of Texas
My Commission Expires: December 6, 2018

