# 900000 4569 **CORPORATION**

ACCOUNT NO. : 072100000032 -

REFERENCE : 359603

AUTHORIZATION :

COST LIMIT : \$ 70.00

ORDER DATE : August 31, 1999

ORDER TIME : 9:26 AM

ORDER NO. : 359603-045

CUSTOMER NO: 4305122

700002977527--0

CUSTOMER: Ms. Kathy Ricke

Fredrikson & Byron

1100 International Centre 900 Second Avenue South Minneapolis, MN 55402

FOREIGN FILINGS

NAME:

EMPI SALES CORP.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson



### 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 Emp	mpi Sales Corp. "COMPANY" "CORPORATION"	or 90			
natural person or	reviations of like import in language at the name at present.)	> 2 <sup>2</sup>			
344	3. 41–1947725	<u> </u>			
2Min	11nnesota (FEI number, if appli	cable) بن			
(State or country	Minnesota 3. 41-1947725  Intry under the law of which it is incorporated) (FEI number, if applied to the law of which it is incorporated)	<b>ن</b>			
	August 16, 1999  Date of incorporation)  5. perpetual  (Duration: Year corp. will cease to exist of	"normatual")			
4. Aug	Duration: Year corp. will cease to exist (Duration: Year corp. will cease to exist (	of perpetual			
6. Aus	August 30, 1999 first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155,	, F.S.)			
(Date first	first transacted business in Florida.) (SEE SECTIONS 607.1301, 607.1302 and	,			
7599	599 Cardigan Road				
	T. D. 1. 201 55126-/1099				
St	St. Paul, MN 55126-4099 (Current mailing address)				
	(Carrent manning was				
o Ma	Market medical devices and related accessories	112			
8. <u>Ma</u>	Market medical devices and related accessorated out in state of Floose(s) of corporation authorized in home state or country to be carried out in state of Floose(s) of corporation authorized in home state or country to be carried out in state of Floose(s) of corporation authorized in home state or country to be carried out in state of Floose(s) of corporation authorized in home state or country to be carried out in state of Floose(s) of corporation authorized in home state or country to be carried out in state of Floose(s) of corporation authorized in home state or country to be carried out in state of Floose(s) of corporation authorized in home state or country to be carried out in state of Floose(s) of corporation authorized in home state or country to be carried out in state of Floose(s) of corporation authorized in home state or country to be carried out in state of Floose(s) of corporation authorized in home state or country to be carried out in state of Floose(s) of corporation authorized in home state or country to be carried out in state of Floose(s) of corporation authorized in home state or country to be carried out in state of Floose(s) of corporation authorized in home state or country to be carried out in state of the corporation authorized in home state of the cor	orida)			
(Purpose	100 North Conference and Mail Drop Roy NC	T acceptable)			
0 Name and st	d street address of Florida registered agent: (P.O. Box or Mail Drop Box NC	<u></u>			
y. Hanno and y					
Name:	Corporation Service Company				
Marie.					
Office Address:	1201 Hays Street	-			
Office Address.	32301				
	Tallahassee , Florida, 32301 (Zip code)				
	(Zip codo)				
10 Registered	red agent's acceptance:				
	a it I was at a comparate	tion at the place designated in			
Having been nan	named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity on, I hereby accept the appointment as registered agent and agree to act in this capacity on, I hereby accept the appointment as registered agent and agree to act in this capacity.	. I further agree to comply			
this application,	on, I hereby accept the appointment as registered agent and agree to act in this cupacity on, I hereby accept the appointment as registered agent and complete performance of my duties, and is is a second agent.	I am familiar with and accept			
1.1 L	Toyone at all Statilles retuine to the Prop.				
the obligations o	ns of my position as registered agent.  Corporation Service Company				
		·			
	By: (Registered agent's signature)	all War and a second			
	(Registered agents signature)	1			
	is a certificate of existence duly authenticated, not more than 90 days prior to delivery of the large of the component of the property of State or other official having custody of corporate records in	t this application to the			
11. Attached is	l is a certificate of existence duly authenticated, not more than 90 days prior to derivery of State, by the Secretary of State or other official having custody of corporate records in	the laurement ander me in an			
Department of S	)I State, by the Sectionary of States				

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

which it is incorporated.

A. DIREC	CTORS (Street address only - P.O. Box NOT acceptable)	
Chairman:	See attached officers/directors rider	<u></u> .
د محمد		
Address: _		48
_	· · · · · · · · · · · · · · · · · · ·	3
Vice Chairr	man:	45 OFF
A ddrago.		<u> </u>
Address: _		3 Jan 1999
_		<del>2</del> 2
Director: _		<u> </u>
Address:		
Audicss		
-		
Director: _	<u></u>	
Address:		
B. OFFIC	CERS (Street address only - P.O. Box NOT acceptable)	
	See attached officers/directors rider	
President:	See attached Utilicers/directors rives	<del></del>
Address: _		
Vice Presid	dent:	
Address: _		· · · · · · · · · · · · · · · · · · ·
_		
-		
Secretary:		
Address: _		
_		
Transitrati		
Address: _		
_		
NOTE: I	If necessary, you may attach an addendum to the application listing additional officers and/or directors.	
	11110-01-0	
13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	***
	H. Philip Vierling, President	
14	(Typed or printed name and capacity of person signing application)	

#### NAMES AND ADDRESSES OF OFFICERS/DIRECTORS

Name Joseph E. Laptewicz, Jr.	Office/Title Chairman of the Board/Chief Executive Officer Vice President/Chief Financial	Address 599 Cardigan Road St. Paul, MN 55126-409 599 Cardigan Road
Patrick D. Spangler	Officer/Assistant Secretary	St. Paul, MN 55126-4099
H. Philip Vierling	President/Chief Operating Officer	599 Cardigan Road St. Paul, MN 55126-4099
Thomas R. King	General Counsel/Secretary	900 Second Ave. So., #1100 Minneapolis, MN 55402
Robert W. Klapp	Vice President of Marketing	599 Cardigan Road St. Paul, MN 55126-4099
Robert N. Hamlin	Vice President of Research and Development	599 Cardigan Road St. Paul, MN 55126-4099
Barbara C. Hutto	Vice President of Human Resources/Facilities	599 Cardigan Road St. Paul, MN 55126-4099
Deborah L. Jensen	Vice President of Regulatory Affairs, Quality Assurance	599 Cardigan Road St. Paul, MN 55126-4099
Glenn Youngkin	and Clinical Research Director	599 Cardigan Road St. Paul, MN 55126-4099

## State of Minnesota

#### SECRETARY OF STATE

99 SEP -2 PM 3: 32

#### Certificate of Good Standing

I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: Empi Sales Corp.

Date Formed: 08/16/1999 -

Chapter Governed By: 302A

This certificate has been issued on 08/24/99.



Mary Hiffmayer Secretary of State.