# MIL0000557a

(Requestor's Name)						
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						





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J. HARRIS

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 200002 768327

COST LIMIT : \$\sqrt{1}\document{5}5\times00

ORDER DATE: June 30, 2016

ORDER TIME : 3:42 PM

ORDER NO. : 200002-040

CUSTOMER NO: 7683275

## FOREIGN FILINGS

NAME: CROSSLINK SURGICAL LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

## **COVER LETTER**

то:	Registration Section Division of Corporation	s					
SUBJE	Crosslink Surgica	al, LLC					
SUBJE		Name of	Limited Liability (	Company			
					insact Business in Florida," Certify company to transact business in		
Please	eturn all correspondence co	oncerning this matter to the	following:				
	Donna Kendrick	ĸ					
		N	ame of Person				
	MyCorporatePa	ralegal.com					
	Firm/Company						
	577 Lakeview T	577 Lakeview Terrace SE					
	Address						
	Mableton, GA 30126						
	City/State and Zip Code						
	dkendrick@mycorporateparalegal.com						
		E-mail address: (to be use	d for future annual	report not	ification)		
For furt	her information concerning	this matter, please call:					
Donna Kendrick			678 at (	777-47	21		
	Name of	f Contact Person	Area Code	Day	time Telephone Number		
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrati Clifton B 2661 Exe	of Corporations ion Section uilding cutive Center Circle iee, FL 32301		
Enclose	ed is a check for the following \$125.00 Filing Fee	ing amount:  \$\square\$ \$130.00 \text{ Filing Fee & Certificate of Status}	\$155.00 Filir Certified Copy	_	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy	ıte	

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FORFIGN' LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Crosslink Surgical, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") Georgia (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) Upon Qualification (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 1880 Beaver Ridge Circle Norcross, GA 30071 (Street Address of Principal Office) 1880 Beaver Ridge Circle Norcross, GA 30071 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: , Florida <sup>32301</sup> Tallahassee (City) Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company 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 complywith 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.
Corporation Service Company Courtney Williams Asst. Vice President By: (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Gordon Ford, Manager, 1880 Beaver Ridge Circle, Norcross, GA 30071 John Lane, Manager, 208 Byron Plantation Road, Atlanta, GA 31721 Thomas Fleetwood, Manager, 1880 Beaver Ridge Circle, Norcross, GA 30071 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of an authorized person

Typed or printed name of signee

Control Number: 09068558

# STATE OF GEORGIA

**Secretary of State** 

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

#### CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the scal of my office that

## CROSSLINK SURGICAL, LLC

## a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number Date Inc/Auth/Filed Jurisdiction Print Date

Form Number

: 13214249 : 09/30/2009 : Georgia

: 06/26/2016 : 211



B: P. Kemp Secretary of State