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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C T CORPORATION SYSTEM

Requestor's Name

1311 Executive Center Drive, Ste. 200

Address

Tallahassee, FL 32301 (904) 656-8298
City State Zip Phone

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CORPORATION(S) NAME

Oblation Products, Inc.

☒ Profit Articles
☐ NonProfit

☐ Amendment

☐ Merger

☐ Foreign

☐ Dissolution/Withdrawal

☐ Mark

☐ Limited Partnership

☐ Annual Report

☐ Other

☐ Reinstatement

☐ Reservation

☐ Change of R.A.

☐ Fictitious Name

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NANCY HENDRICKS MAR 14 1995

**ARTICLES OF INCORPORATION OF
ABLATION PRODUCTS, INC.**

The undersigned, acting as incorporator of a Florida corporation under the Florida Business Corporation Act, Chapter 607 of the Florida Statutes, hereby adopts the following Articles of Incorporation for such Corporation:

**ARTICLE I
NAME**

The name of the Corporation is Ablation Products, Inc.

**ARTICLE II
PRINCIPAL OFFICE AND MAILING ADDRESS**

The address of the Corporation's principal office is 400 Gloucester Street, Englewood, New Jersey 07631, and the mailing address of the Corporation is 400 Gloucester Street, Englewood, New Jersey 07631.

**ARTICLE III
PURPOSE**

The Corporation is organized for the purpose of transacting any and all lawful business for which corporations may be incorporated under the laws of Florida.

**ARTICLE IV
CAPITAL STOCK**

The Corporation is authorized to issue 10,000 shares of common stock, One Cent (\$.01) par value per share.

**ARTICLE V
INITIAL REGISTERED AGENT AND OFFICE**

The name of the initial registered agent of the Corporation and the street address of the initial registered office of the Corporation are as follows:

<u>Name</u>	<u>Address</u>
John W. Puffer, III	101 E. Kennedy Boulevard, Suite 2500 Tampa, Florida 33602

**ARTICLE VI
INITIAL BOARD OF DIRECTORS**

The Corporation shall have initially one director to hold office until the first annual meeting of shareholders and until his successor shall have been elected and qualified, or until his earlier resignation, removal from office or death. The number of directors may be either

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increased or decreased from time to time in accordance with the Bylaws of the Corporation. The name and address of the initial director of the Corporation are:

<u>Name</u>	<u>Address</u>
Robert S. Neuwirth	400 Gloucester Street Englewood, New Jersey 07631

ARTICLE VII
INCORPORATOR


The name and address of the person signing these Articles as Incorporator are:

<u>Name</u>	<u>Address</u>
John W. Puffer, III	101 E. Kennedy Boulevard, Suite 2500 Tampa, Florida 33602

ARTICLE VIII
INDEMNIFICATION

The Corporation shall indemnify any person who is or was a Director, Officer, employee, or agent of the Corporation or was serving at the request of the Corporation as a Director, Officer, employee, or agent of another corporation, partnership, joint venture, trust, or other enterprise, to the fullest extent permitted by law.


IN WITNESS WHEREOF, the undersigned has executed these Articles of Incorporation this 10th day of March, 1995.



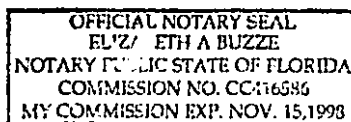
John W. Puffer, III, Incorporator

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this 10th day of March, 1995, by John W. Puffer, III, an individual who is personally known to me and did not take an oath.



Notary Public
Print Name: Elizabeth Buzze
My Commission Expires:



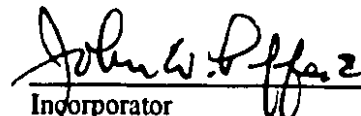
**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is Ablation Products, Inc.
2. The name and address of the registered agent and office is:

John W. Puffer, III
101 E. Kennedy Boulevard, Suite 2500
Tampa, Florida 33602


SIGNATURE:
TITLE:


Incorporator

DATE: March 10, 1995

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

SIGNATURE:


John W. Puffer, III

DATE: March 10, 1995