Filing and License Fee: \$310.00 minimum

ID Number:	
ID Number:	



### STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615

#### **BUSINESS CORPORATION**

## **APPLICATION FOR CERTIFICATE OF AUTHORITY**

Pursuant to the provisions of Section 7-1.2-1405 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign

corporation hereby app the following statement:	lies for a Certificate of Au	thority to transact busines	s in the State of Rhode	e Island, and for that purpose submits
1. The name of the cor	poration is Astra Tech I	nc.		
2. It is incorporated und	der the laws of Delaware			
3. The name, if differen	nt, which it elects to use in	Rhode Island is:		
"incorporated,"		eviation thereof, then list t		the word "corporation," "company," ration with the addition of one of the
(b) If the corporate qualify and tree application:	e name is not available in ansact business in Rhode	Rhode Island, then set foe Island as stated in the	rth below the fictitious "Fictitious Business N	name under which the corporation will lame Statement" to be filed with this
4. The date of its incor	poration is <u>06/10/1991</u>	and	the period of its durati	on is Perpetual
5. The address of its p	rincipal office in the state o	or country under the laws	of which it is incorporate	ed is
Corporation Trust Co	enter - 1209 Orange Street	t, Wilmington, Delaware,	19801	
6. The address of its p	roposed registered office i	in Rhode Island is 155 So	uth Main Street, Suite	301
	, <b>-, </b>	<u> </u>		Address, <u>not</u> P.O. Box)
Prov (City/	100,100	, RI 02903 and (Zip Code)	the name of its propos	ed registered agent in Rhode Island at
	-	(Zip oode)		
that address is C	T Corporation System	(Name of Ag	ent)	
7. The purpose or purp	ooses which it proposes to	pursue in the transaction	of business in Rhode Is	sland are:
	cal, surgical, dental, and s			
8. (a) The names and	respective addresses of it	ts directors (optional unles	s directors are required	under the laws of the state or country
of which it is inco	orporated).			
	<u>Name</u>		_	<u>ddress</u>
Director	Peter Selley	Aminogate	en 1, Box 14, Molndal,	SWEDE 43121
Director Director		FILED		= 1 + OH 6307
Director				7000 HOX 15 FH 11: P
		NOV 1 2 2009	1410	NC STATE OF THE ST
Form No. 150 Revised: 12/05		By ()>	141	SWIVE FUEL SECTION
1/12/2008 CT Filing Manager Online		103576	٠.	· · · · · · · · · · · · · · · · · · ·

RI039 - 11/12/2008 CT Filing Manager Online

		2.0.00	y 3, 11111011 1610 II	ncorporated). SEE ATT		Addross		
				<u>Name</u>	<u>Address</u>			
		esident	Scott A. Root		590 Lincoln Street, Waltha	ım, MA 02451		
Vice Preside Treasurer Secretary								
			Scott A. Root		590 Lincoln Street, Waltham, MA 02451			
		•						
		The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:						
						Par Value or Statement that		
		Number of	·	Class	<u>Series</u>	Shares are without Par Value		
	_	<u>25,000</u>		Common		\$.01		
10.	(a)	An estimate (		all property to be ow	ned by the corporation for	r the following year, wherever located, is		
		2000000.00		<u> </u>				
	(b)	An estimate of \$0.0000	of the value of	f the corporation's prop	erty to be located within I	Rhode Island during the following year is		
	(c)	located within	this state during	the following year bear	s to the value of all property	alue of the property of the corporation to be of the corporation to be owned during the nultiply by 100 to obtain the percentage].		
11.	(a)	An estimate \$ 80000000.0		mount of business to	be transacted by the cor	rporation during the following year is		
	(b)		e of the gross amount of business to be transacted by the corporation at or from places of business in Rhode gethe following year is \$\frac{16972,0000}{2}.					
	(c)	corporation at	or from places of by the corporate	of business in this state	during the following year be	mount of business to be transacted by the ears to the gross amount thereof which will vide (b) by (a) and multiply by 100 to obtain		
12.		s application is which it is incom		y a certificate of Good S	tanding issued by the prope	r officer of the state or country under the laws		
13.	This	Application for the 90 <sup>th</sup> day a	Certificate of A	Authority shall be effective this filing	e upon filing unless a speci	fied date is provided which shall be no later		
_		10/3	nlag		examined this Application	ury, I declare and affirm that I have on for Certificate of Authority, including tachments, and that all statements and correct.		
Da	e:	1013	201		Signature of Au	thorized Officer of the Corporation		
					•	anonicou of the outpotation		
					Scott A. Root, President	t Name of Authorized Officer		
					Type of Prin	R Name of Authorized Officer		

## Attachment to Rhode Island Officers & Directors

1 Full Name: James Bailey

Officer/Director: Officer
Officer's Title: CFO

Business Address: 590 Lincoln Street

City: Waltham

State: MA ZIP Code: 02451

# Delaware

PAGE 1

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ASTRA TECH 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 TENTH DAY OF NOVEMBER,

A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

2265375 8300

091004193

AUTHENTICATION: 7632097

DATE: 11-10-09

You may verify this certificate online at corp.delaware.gov/authver.shtml



## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

