

1.) CORPORATION NAME: DePuy Orthopaedics, Inc.	DUE DATE: 2/28/2013				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA 23060-6802	SCC ID NO: F1096983				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY	5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED				
COMMON	1,000				
4.) STATE OR COUNTRY OF INCORPORATION: IN					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 700 ORTHOPAEDIC DRIVE

CITY/ST/ZIP: WARSAW, IN 46581

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
NAME: Andrew K Ekdahl			
TITLE: PRESIDENT			
ADDRESS: 700 Orthopaedic Drive			
CITY/ST/ZIP/CO: Warsaw , IN 46581			

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: Scott R Ryan			
TITLE: SECRETARY			
ADDRESS: 700 Orthopaedic Drive			
CITY/ST/ZIP/CO: Warsaw , IN 46581			

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
NAME: Peter Batesko, III			
TITLE: TREASURER			
ADDRESS: 700 Orthopaedic Drive			
CITY/ST/ZIP/CO: Warsaw , IN 46581			

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ Scott RRyan	Scott RRyan,	1/24/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.