NORTH BROWARD HOSPITAL DISTRICT (NBHD) DBA BROWARD HEALTH LOBBYING REGISTRATION FORM

(SEE BACK FOR INSTRUCTIONS)

For what purpose are you using this form?

☑ New Registration ☐ Change to Profile ☐ Renewal

To which fiscal year does this form apply? 20 27

LOBBYIST:

Alexis (Last Name) Nedy (First Name) (Middle)

2713 SW 82nd Avenue, Mirarmar, FL, 33025
Mailing Address

compliance_bch_medtronic_1@mult
Email Address

( ) (516) 491-9025 Office Number ( ) Cell Number

Lobbying Firm on behalf of which lobbyist is representing principal (if any)

Lobbying Firm's Mailing Address

( ) Telephone Number

Do you have any direct or indirect business association, partnership, or financial relationship or live in the same household with or are related to any Broward Health Board Member, Board Committee Member, employee, or agent?

☑ No ☐ Yes. State with whom and explain:

Have you ever been an employee of Broward Health? ☑ No ☐ Yes,

Title Date of Employment Date of Separation

Have you ever served as an NBHD Commissioner or on a Commission Sub-Committee?

☑ No ☐ Yes, Date of Service Date of Separation

OATH

I do solemnly swear that all the foregoing facts are true and correct.

Nedy Alexis
Original Signature of Lobbyist

Provide the names, business address, telephone number and area of interest of each principal represented.

PRINCIPAL #1 Medtronic Inc.
Principal Name

2480 Pale Tiger Court
Principal Mailing Address

Tallahassee, FL, 32309

( ) (516) 491-9025
Principal Telephone Number

Nellcor - Pulse Oximtery, Acute Care monitoring, Capnography-m
Areas of Interest/General & Specific Subject Matter

PRINCIPAL #2
Principal Name

Principal Mailing Address

( )
Principal Telephone Number

Areas of Interest/General & Specific Subject Matter

PRINCIPAL #3
Principal Name

Principal Mailing Address

( )
Principal Telephone Number

Areas of Interest/General & Specific Subject Matter

STATE OF FLORIDA
COUNTY OF Broward

Sworn to (or affirmed) and subscribed before me this 01 day of October, 2026 by Nedy Alexis.

(Signature of Notary Public--State of Florida)

Nichola Burton
(Print, Type, or Stamp Commissioned Name of Notary Public)

NICHOLA BURTON
Notary Public
State of Florida
Comm# HH589341
Expires 9/3/2028

Personally Known ____ OR Produced Identification PDL

Type of Identification Produced PDL

NORTH BROWARD
HOSPITAL DISTRICT

Principal Authorization Form

Authorization to Represent the Principal

Type or print the principal represented and name of lobbyist as they are shown on the registration form, also, describe the main business. This authorization to represent the principal before the North Broward Hospital District dba Broward Health for this lobbyist will be carried forward each calendar year if the renewal form submitted by this lobbyist indicates "yes" to renew for the next year. Cancellation of a lobbyist's registration by the principal must be provided by written notice. Cancellation forms can be found at www.browardhealth.org

Medtronic Inc. hereby authorizes Nedy Alexis

Principal Name — Lobbyist's Name

Vital Organ Therapies

Description of Principal's Main Business

Michael A. Krzmarcik Digitally signed by Michael A. Krzmarcik Date: 2026.09.01 08:11:38 -05'00'

Signature of Principal or Principal's Representative

Michael Krzmarcik

Print Principal Name / Principal's Representative

U.S. Senior Sales Administration Manager

Print Title of Principal / Principal's Representative

9/1/26

Date

Attach this authorization to your registration form.