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(7.0	101655 <i>)</i>		
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PICK-UP	WAIT	MAIL	
(Bı	usiness Entity Nam	e)	
(Do	ocument Number)	<u> </u>	
Certified Copies	d Copies Certificates of Status		
Special Instructions to	Eiling Officer		
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SECRETARY OF STATE
ALL AMASSES OF STATE

2/11/02

CT CORPORATION

December 11, 2002

Secretary of State, Florida 409 East Gaines Street Tallahassee FL 32399

Re: Order #: 5740446 SO

Customer Reference 1: Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Midwest Medical Laboratories Corporation (IL) Evidence of Amendment Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Ashley A Mitchell
Fulfillment Specialist
Ashley_Mitchell@cch-lis.com

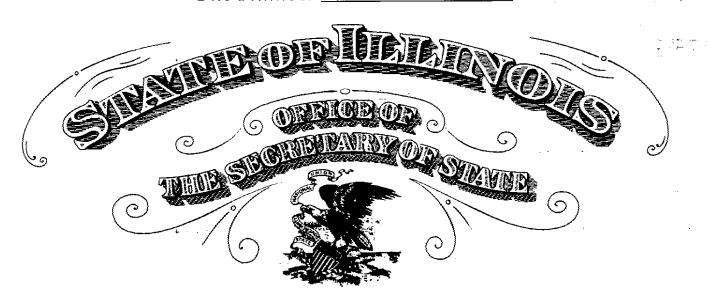
660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)		AV. R	
	00006396		一声 二个
Document Number	of Corporation	n (If known)	ANC Z
1. Midwest Medical La	boratorie	s Corporation	Single Control of the
(Name of corporation as it appears			27.9
			P
2. Illinois	3	December 17 2001	
(Incorporated under laws of)	<i>J.</i>	December 17, 2001 (Date authorized to do bus	iness in Florida)
	CTION II		
(4-7 COMPLETE ONLY	THE APPLIC	'ABLE CHANGES)	
4. If the amendment changes the name of the corporation	on, when wa	s the change effected un	der the laws of
its jurisdiction of incorporation? December 3,	2002		, —
 Midwest Medical Laboratories, Inc. (Name of corporation after the amendment, adding suffix "corporation") 	aration ⁸ "corre	nany" or Sincomorated " or a	nnronriata abbraziation if
not contained in new name of the corporation)	manon com	pany or meorporated, or a	ppropriate approviation, it
6. If the amendment changes the period of duration, ind	licate new po	eriod of duration.	
	N/A w duration)		
(Net	w duration)		
7. If the amendment changes the jurisdiction of incorpo	ration, indic	ate new jurisdiction.	
	N/A		
(New	N/A jurisdiction)		-
1 Old h Scarry		November 25,	2002
(Signature of the chairman or vice chairman of the board		(Date)	
president, or any officer, or if the comporation is in the h a receiver, trustee, or other court-appointed fiduciary, by	ands of y that		
fiduciary)	-		
Ralph Scorpio		President	
(Typed or printed name)	· -	(Title)	

File Number 5694-399-4



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do

hereby certify that





In Testimony Whereof, I, hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this _______ day of _____ DECEMBER A.D. _____2002 .