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DATE:

04-01-2011

NAME: APP-UNIPATH, LLC

TYPE OF FILING: APPLICATION BY FOREIGN LLC TO TRANSACT **BUSINESS IN FLORIDA** 

COST:

\$125

**RETURN:** 

ACCOUNT: FCA00000015

**AUTHORIZATION:** 

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES	C. THE FOLLOWING IS SUBMITTED TO REGISTER A FAIRFICH
LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE S	TATEOF FLORIDA:
1. APP- UniPat (Name of Foreign Limited Liability Company; must include	th, LLC
(Name of Foreign Limited Liability Company; must includ	e "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the altern Company," "L.L.C," "L.L.C.")	
2. Colorado (Jurisdiction under the law of which foreign limited liability) 3.	26-3575135 (FEI number, if applicable)
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. October 8, 2008 5.	Perpetual (Duration: Year limited liability company will cease to
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon registration	
(Date first transacted business in Flori (See sections 608,501 & 608,502 F.S. to	da, if prior to registration.) o determine penalty liability)
7. 103 Continental Place, Suite 400, Bre	ntwood, TN 37027
8. If limited liability company is a manager-managed company is a manager-	ompany, check here
10. Attached is an original certificate of existence, no more than 90 day the jurisdiction under the law of which it is organized. (A photocopy is translation of the certificate under eath of the translator must be submit	s not acceptable. If the certificate is in a foreign language, a
11. Nature of business or purposes to be conducted or p	romoted in Florida:
Pathology laboratory services	
lu c ri II	_
Signature of a member or an author	orized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of the control of the	
document to the Department of State constitutes a  Lee C. Dilworth	I am aware that any false information submitted in a third degree felony as provided for in s.817.155, F.S.)
Typed or printed p	ame of signee

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:		
APP- UniPath, LLC  If unavailable, the alternate to be used in the state of Florida is:		
NRAI Services, Inc.		
(Name)		
515 E. Park Avenue		
Florida Street Address (P.O. Box NOT ACCEPTABLE)		
Tallahassee, FL 32301		
City/State/Zip		
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registere 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 obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.  NRAI Services, Inc.  Charles Coyle (Signature) Assistant Secretary		

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

## OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

#### CERTIFICATE

I, Scott Gessler, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office.

#### APP-UniPath, LLC

is a Limited Liability Company formed or registered on 10/08/2008 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20081536786.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 03/28/2011 that have been posted, and by documents delivered to this office electronically through 03/31/2011 @ 09:41:20.

I have affixed hereto the Great Scal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 03/31/2011 @ 09:41:20 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 7906726.



Secretary of State of the State of Colorado

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Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by viviting the Certificate Confirmation Page of the Secretary of State's Web site, <a href="http://www.sos.state.co.us/bip/CertificateSeorehCriteria.do">http://www.sos.state.co.us/bip/CertificateSeorehCriteria.do</a> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. <a href="http://www.sos.state.co.us-chck-Business">Confirming the issuance of a certificate is merely optional and is not used to the valid and effective issuance of a certificate. For more information, visit our Web site. http://www.sos.state.co.us-chck-Business Center and select "Frequently Asked Questions."