

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Veritas Laboratories, LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Justin Connell
Name of Person

Elarbee, Thompson, Sapp & Wilson
Firm/Company

800 International Tower 229 Peachtree St
Address

Atlanta, GA 30303
City/State and Zip Code

connell@elarbee-thompson.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Justin Connell at (404) 582-8447
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

2016 MAR 15 PM 1:31
FILED
RECEIVED BY STATE
FALL MARIASCOE, FLORIDA

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: Veritas Laboratories, LLC

Enter new principal office address, if applicable:

N/A

**(Principal office address
MUST BE A STREET ADDRESS)**

Enter new mailing address, if applicable:

N/A

**(Mailing address
MAY BE A POST OFFICE BOX)**

2. The Florida document number of this limited liability company is:

M13000000 502

3. Jurisdiction of its organization:

Georgia

4. Date authorized to do business in Florida:

1/22/2013

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company:

Luminus Diagnostics, LLC

(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

same

New Registered Office Address:

Enter Florida Street Address

Florida

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative 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 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

N/A

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

N/A

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
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_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

FILED
 16 MAR 2015
 11:51 AM
 CLERK OF SUPERIOR COURT
 ALABAMA

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Justin B. Connell
 Signature of the authorized representative

Justin B. Connell
 Typed or printed name of signee

Filing Fee: \$25.00

STATE OF GEORGIA

Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

CERTIFICATE OF AMENDMENT

NAME CHANGE

I, Brian P. Kemp, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

VERITAS LABORATORIES, LLC.

a Domestic Limited Liability Company

has filed articles/certificate of amendment in the Office of the Secretary of State on 02/18/2016 changing its name to

Luminus Diagnostics, LLC

and has paid the required fees as provided by Title 14 of the Official Code of Georgia Annotated. Attached hereto is a true and correct copy of said articles/ certificate of amendment.

WITNESS my hand and official seal in the City of Atlanta
and the State of Georgia on 03/04/2016

FILED
2016 MAR 15 PM 1:31
SECRETARY OF STATE
FALL BRASSE, FLORENCE



A handwritten signature in black ink, appearing to read "B. P. Kemp".

Brian P. Kemp
Secretary of State