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PICK-UP	WAIT MAIL			
(Bu	usiness Entity Name)			
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Certified Copies	Certificates of Status			
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DEPARTNER FOR STATE

MIB JUL 26 PM 1:21
SECRETARY OF STATE

JUL 26 2013 J. BRYMN



ACCOUNT NO. : 12000000195

REFERENCE : 738782

AUTHORIZATION :

COST LIMIT : \$ 125'.00~

ORDER DATE: July 25, 2013

ORDER TIME : 5:26 PM

PLEASE FILE 2ND

ORDER NO. : 738782-040

FILE 1ST WAS A W/D DUE TO

CONVERSION IN DE.

CUSTOMER NO: 7424465

FOREIGN FILINGS

NAME: ALERE NORTH AMERICA, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

__ CERTIFIED COPY

XX PLAIN STAMPED COPY

____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER:

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Alere North America, LLC (Name of Foreign Limited Liability Company; must include "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 include "Limited Liability Company," "L.L.C," "LLC.") Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 11/20/2007 (Date of Organization) (Duration: Year limited liability company wi exist or "perpetual") Upon filing (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 30 South Keller Road, Suite 100, Orlando, FL 32818 (Street Address of Principal Office) 8 If limited liability company is a manager-managed company, check here 📳 The name and usual business addresses of the managing members or managers are as follows: Jim Post, 30 South Keller Road, Suite 100, Orlando, FL 32818 Daniella Cramp, 30 South Keller Road, Suite 100, Orlando, FL 32818 Ellen Chiniara, 51 Sawyer Road, Suite 200, Waltham, MA 02453 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) All Nature of business or purposes to be conducted or promoted in Florida: Sales of in vitro diagnostics equipment and instruments Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the

penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Typed or printed name of signee

Jay McNamara, Assistant Secretary

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

f,

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.

 The name o 	f the Limited Liability	Company is:	
Alere North Ame	erica, LLC	<u>.</u>	
If unavailable,	the alternate to be used	d in the state of Florida is:	THE WASHINGTON
2. The name as	nd the Florida street ac	ddress of the registered agent and office are:	PH 1:3
Corporation Service Company		ALL OF	
		(Name)	· •
	1201 Hays Street		
	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 registered 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.

Corporation Sue G. Knight

By:

(Signature)

Sue G. Knight

Assistant Vice President

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Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "ALERE NORTH AMERICA, LLC" IS DULY
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD
STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS
OFFICE SHOW, AS OF THE TWENTY-FIFTH DAY OF JULY, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ALERE NORTH AMERICA, LLC" WAS FORMED ON THE TWENTIETH DAY OF NOVEMBER, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4460813 8300

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Jeffrey W Bullock, Secretary of State
AUTHENTY CATION: 0614801

DATE: 07-25-13

You may verify this certificate online at corp.delaware.gov/authver.shtml