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CORPORATION(S) NAME			MA 23 TATE	TED .
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Document				
Examiner		Ref#:		
Updater				
Verifier				
W.P. Verifier		Amount: \$		

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615 m 3/2-3

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO BUSINESS IN FLORIDA IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBM REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA 1. PerkinElmer Life Sciences, Inc. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.) 2. Delaware (State or country under the law of which it is incorporated) (FEI number, if applicable) 4. 3/26/1997 5. perpetual (Duration: Year corp. will cease to exist or "perpetual") (Date of incorporation) Upon Qualfication (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 7. 549 Albany Street, Boston, MA 02118 (Current mailing address) 8. sale of invitro biochemicals for labeling and detection in life science research and clinical diagnostic applications and other (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) C T Corporation System Office Address: 1200 South Pine Island Road Plantation 10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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. C T Corporation System gistered agent's signature)

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable) FL019-9/2/99 CT System Online

which it is incorporated.

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the

Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of

A DIDECTORS (C	128
A. DIRECTORS (Street address only - P.O. Box NOT acceptal	
Chairman: Robert F. Friel	- F. 72 M
Address: 45 William Street, Wellesley, MA 02481	SER D
	70
Vice Chairman:	
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Address: 45 William Street, Wellesley, MA 02481	and the second s
1	
Director: John L. Healy	- u - u
Address: 45 William Street, Wellesley, MA 02481	
B. OFFICERS (Street address only - P.O. Box NOT acce	ptable)
President: Patrik Dahlen	<u></u>
Address: 549 Albany Street, Boston, MA 02481	
Vice President: Petri Myllyneva	Vice President! Robert Wylie
Address: 549 Albany Street, Boston, MA 02481	45 William St. Wellesley, MA
Secretary: Petri Myllyneva	
Address: 549 Albany Street, Boston, MA 02481	
Treasurer: Gregory Perry	
Address: 549 Albany Street, Boston, MA 02481	
	===
NOTE: If necessary, you may attach appaddendum to the application	on listing additional officers and/or directors.
13 (IN)	13 mara 7601
(Signature of Chairman, Vice Chairman, or any off	icer listed in number 12 of the application)
14	le Vice-Presidet
LI VOMO OF BEIDER DAME AND CANA	CINY OF DESCRIPTION OF APPRICACEOUS

State of Delaware Office of the Secretary of State

FILED ON MAR 23 PH SECRETARY OF TALLAHASSEE,

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PERKINELMER LIFE SCIENCES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF MARCH, A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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



Warriet Smith Windson Harriet Smith Windson, Secretary of State

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AUTHENTICATION: 1035921

010139285

DATE: 03-21-01