F01000006538

(Requestor's Name)			
(Address)			
(Address)			
(Address)			
(City/State/Zin/Dhone 49)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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SECRETARY OF STATE

R.A. Change C.COULLIETTE

JUL 0 9 2009

EXAMINER



Statement of Change of Registered Office or Registered Agent or Both for Corporations

Capitol Corporate Services, Inc. PO Box 1831 Austin, TX 78767 Phone: 800-345-4647 Fax: 800-432-3622

regagent@capitolservices com

Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 DATE: STATE: 7/2/2009 FLORIDA

REP UNIT: ATHENA DIAGNOSTICS, INC.

Enclosed for filing please find a Statement of Change of Registered Office or Registered Agent or Both for Corporations for the above referenced name, which is to be filed in your office. Enclosed is check #16547 in the amount of \$35.00 for the filing fee. After filing, please return the file-stamped copy in the enclosed self-addressed envelope. If you have any questions please call 800-345-4647 and ask for the Change of Agent Section of the Registered Agent Department.

COVER LETTER

SUBJECT:	ATHENA DIAGNO (Name of C	STICS, INC.
	(Tame of o	orporamen,
DOCUMENT N	UMBER: <u>F01000006538</u>	
The enclosed Sta	tement of Change of Registered Office	e/Agent and fee are submitted for filing.
Please return all	correspondence concerning this matter	to the following:
	Myra H (Name of Co	lomer
	(Name of Con	ntact Person)
	Capitol Corporat	e Services, Inc.
	800 Brazos	Suite 400
	(Add	
	Austin, Tex (City/State ar	as 78701
	(City/State ar	nd Zip Code)
For further inform	mation concerning this matter, please of	all:
	Myra Homer Name of Contact Person)	at (<u>800</u>) <u>345-4647</u> (Area Code & Daytime Telephone Number)
	5.00 check made payable to the Depart	
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

TO:

Amendment Section Division of Corporations

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, statement of change is submitted for a corporation organization in order to change its registered office or registered.	ed under the laws of the State of DELAWARE
1. The name of the corporation: ATH	IENA DIAGNOSTICS, INC.
2. The principal office address: <u>377 PLANTATION STRI</u>	
3. The mailing address (if different): C/O THERMO FISHER	R SCIENTIFIC, 2000 PARK LANE, PITTSBURGH, PA 1527
4. Date of incorporation/qualification: 12/26/2001	Document number: F01000006538
5. The name and street address of the current registered age Florida Department of State:	ent and registered office on file with the
CT CORPORATION SYSTEM	
1200 SOUTH PINE ISLAND ROAD	SECR
PLANTATION FL 33324	
6. The name and street address of the new registered agent (if changed):	(if changed) and /or registered of the control of t
Capitol Corporate Services, Inc.	
155 Office Plaza Drive, Suite A (P.O. Box NOT acceptable)	
Tallahassee	Florida 32301
The street address of its registered office and the street as changed will be identical.	ddress of the business office of its registered agent,
Such change was authorized by resolution duly adopted authorized by the board, or the corporation has been not	by its board of directors or by an officer so fied in writing of the change.
Mya Hower (bignature of an other or director)	Myra Homer, Attorney-in-fact (Printed or typed name and title)
I hereby accept the appointment as registered agent and I further agree to comply with the provisions of all statut of my duties, and I am familiar with and accept the oblig document is being filed merely to reflect a change in the corporation has been notified in writing of this change.	agree to act in this capacity. les relative to the proper and complete performance lation of my position as registered agent. Or, if this registered office address, I hereby confirm that the
Chayle Windle (Signature of Registered Agent)	July 2,2009

If signing on behalf of an entity:

Gayle winde Asst. Secretary on Behalf of Capitol Corporate Services, Inc. (Typed or Printed Name)

* * * FILING FEE: \$35.00 * * *

SPECIAL POWER OF ATTORNEY

Seth Hoogasian, a duly authorized officer and/or director of the entities listed on Exhibit A hereto (the "Entities") does hereby make, constitute, and appoint Capitol Services, Inc., Capitol Corporate Services, Inc. and Capitol Document Services, Inc. and each duly authorized representative of such entities, including without limitation Ms. Myra Homer and Ms. Delanie Case, as his true and lawful attorneys-in-fact with full right, power and authority for him, as an authorized officer or manager of the Entities, in his name, place and stead to prepare, execute, acknowledge, and file or to cause to be prepared, executed, acknowledged, and filed, any and all documents and forms as may be necessary or appropriate to be filed by the Entities or on their behalf with any state agency in order to effectuate a change in the Entities' registered agent to Capitol Services, Inc., Capitol Corporate Services, Inc. or Capitol Document Services, Inc., as applicable.

GIVING AND GRANTING to said attorneys-in-fact full power and authority to do and perform every act necessary or appropriate to be done in the exercise of the foregoing power as fully as Seth Hoogasian, a duly authorized officer or director of the Entities, could do if personally present and acting, with full power of substitution and resubstitution, hereby ratifying, confirming, and approving all that said attorneys-in-fact shall lawfully do or cause to be done by virtue hereof.

This Special Power of Attorney shall be effective as of the date set forth below and shall continue in effect until revoked by Seth Hoogasian by written notice to said attorneys-infact.

IN WITNESS WHEREOF, Seth Hoogasian has set his hand this $\frac{4k}{2}$ day of June, 2009.

Seth Hoogasian

Director or President