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February 25, 2002

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

Alere Medical Incorporated

Filing Evidence

- ☐ Plain/Confirmation Copy
☒ Certified Copy

Retrieval Request

- ☐ Photocopy
☐ Certified Copy

Type of Document

- ☐ Certificate of Status
☐ Certificate of Good Standing
☐ Articles Only
☐ All Charter Documents to Include Articles & Amendments
☐ Fictitious Name Certificate
☐ Other

NEW FILINGS	
☐	Profit
☐	Non Profit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of RA Officer/Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Reports
☐	Fictitious Name
☐	Name Reservation
☐	Reinstatement

REGISTRATION/QUALIFICATION	
☒	Foreign
☐	Limited Liability
☐	Reinstatement
☐	Trademark
☐	Other

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02 FEB 25 PM 2 11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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02 FEB 25 AM 11:49
BK
TALLAHASSEE, FLORIDA
STATE
SECRETARY OF STATE

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

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02 FEB 25 PM 4:11
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TALLAHASSEE, FLORIDA

1. ALERE MEDICAL INCORPORATED
(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. California
(State or country under the law of which it is incorporated)
3. 94-3238845
(FEI number, if applicable)
4. February 9, 1996
(Date of incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. upon qualification
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 595 Double Eagle Court, Suite 1000
(Principal office address)
Reno, Nevada 89511-8991
(Current mailing address)
8. Provide in home clinical monitoring for heart failure patients.
(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)
Name: UCC Filing & Search Services, Inc.
Office Address: 526 East Park Avenue, Suite 200
Tallahassee, Florida 32302
(City) (Zip code)

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.

Alison Hand

(Registered agent's signature)

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 which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Melissa Prince Quisenberry

Address: 595 Double Eagle Court, Suite 1000
Reno, Nevada 89511-8991

~~Vice Chairman~~ Director: L. John Lester Ron Geraty

Address: Same as above Same as above

Director: Edwin M. Kania Jr. L. James Strand

Address: Same as above Same as above

Director: Peter Sears Robb S. Smith

Address: Same as above Same as above

B. OFFICERS

President: K. Randall Burt

Address: Same as above

~~Vice President~~ CEO: Ron Geraty

Address: Same as above

Secretary: L. John Lloyd

Address: Same as above

Treasurer: ~~CEO:~~ Wayne Krachun

Address: Same as above

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Wayne Krachun
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Wayne Krachun, CFO
(Typed or printed name and capacity of person signing application)

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**SECRETARY OF STATE
CERTIFICATE OF STATUS
DOMESTIC CORPORATION**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, BILL JONES, Secretary of State of the State of California, hereby certify:

That on the **9th day of February, 1996, ALERE MEDICAL INCORPORATED** became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That no record exists in this office of a certificate of dissolution of said corporation nor of a court order declaring dissolution thereof, nor of a merger or consolidation which terminated its existence; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of February 20, 2002.



Bill Jones
BILL JONES
Secretary of State

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