

F09000005102

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

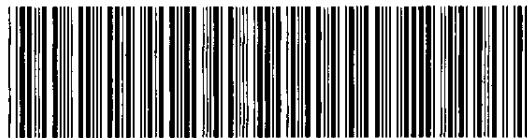
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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12/22/09--01003--007 \*\*70.00

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09 DEC 21 PM 3:09  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

12/22/09

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Diagnostic Hybrids, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Name of Person

C T Corporation System

Firm/Company

Address

City/State and Zip code

MTGROVE @ VORYS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Person

at ( )

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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Enclosed is a check for the following amount:



\$70.00 Filing Fee



\$78.75 Filing Fee &  
Certificate of Status



\$78.75 Filing Fee &  
Certified CopCe



\$87.50 Filing Fee,  
rtificate of Status &  
Certified Copy

**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.*

1. Diagnostic Hybrids, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Ohio 3. 31-1050325  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. November 26, 1982 5. perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. January 1, 2008  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1055 East State Street, Suite 100, Athens, Ohio 45701  
(Principal office address)

(Current mailing address)

8. Development, manufacturing and marketing of medical diagnostic kits for the detection of disease.  
(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 NOT acceptable)

Name: C T Corporation System

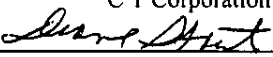
Office Address: 1200 South Pine Island Road

Plantation, , Florida 33324  
(City) (Zip code)

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**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  
By:   
(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:

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**A. DIRECTORS**

Chairman: See attached addendum

Address:

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

**B. OFFICERS**

President: and Chief Executive Officer: David Scholl

Address: 1055 East State Street, Suite 100, Athens, Ohio 45701

Vice President: Senior Vice President and Chief Operating Officer: James Brown

Address: 1055 East State Street, Suite 100, Athens, Ohio 45701

Secretary:

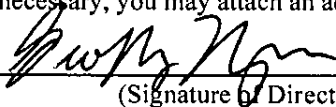
Address:

Treasurer: Vice President and Chief Financial Officer: Geoffrey Morgan

Address: 1055 East State Street, Suite 100, Athens, Ohio 45701

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

13.



(Signature of Director or Officer listed in number 12 of the application)

14. Geoffrey Morgan, Vice President & Chief Financial Officer

(Typed or printed name and capacity of person signing application)

ADDENDUM TO THE  
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION  
TO TRANSACT BUSINESS IN FLORIDA FOR  
DIAGNOSTIC HYBRIDS, INC.

12. Names and business addresses of the directors:

David Scholl  
1055 East State Street, Suite 100  
Athens, OH 45701

James Brown  
1055 East State Street, Suite 100  
Athens, OH 45701

Wilfred Konneker  
2 Barclay Woods  
St. Louis, MO 63124

Robert Axline  
31 Pierce Street  
Northboro, MA 01532

Harrison Miller  
499 Hamilton Avenue  
Palo Alto, CA 94301

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**United States of America  
State of Ohio  
Office of the Secretary of State**

*I, Jennifer Brunner, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show **DIAGNOSTIC HYBRIDS, INC.**, an Ohio corporation, Charter No. 604115, having its principal location in Athens, County of Athens, was incorporated on November 26, 1982 and is currently in **GOOD STANDING** upon the records of this office.*

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*Witness my hand and the seal of the  
Secretary of State at Columbus, Ohio  
this 16th day of December, A.D. 2009*

A handwritten signature in cursive script, appearing to read "Jennifer Brunner".

Ohio Secretary of State