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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT:	Mobile Biopsy, Inc
	Name of Corporation
DOCUMENT NUMBER:	F11000001351
The enclosed Affidavit by Foreign Consubmitted for filing.	rporation to Change/Add Officer(s) and/or Director(s) and fee are
Please return all correspondence concer	rning this matter to the following:
Glenn Hetu	
Name of Contact Person	n ,
Mobile Biopsy, In-	С
Firm/Company	
1500 West Park Dr sui	te 390
Westborough, MA 01	581
City/State and Zip Coo	de
ghetu@ums-usa E-mail address: (to be used for future	a.com annual report notification)
For further information concerning this	matter, please call:
Glenn Hetu Name of Contact Person	at ( 508 ) 870-6565 Area Code & Daytime Telephone Number
Enclosed is a check made payable to th	e Florida Department of State for the following amount:
\$35.00 Filing Fee \$43.75 Filing I Certificate of	Status  \$43.75 Filing Fee & S52.50 Filing Fee, Certified Copy (Additional copy is enclosed)  \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314







## AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S) AND/OR DIRECTOR(S)

(Note: Applicable only during the first calendar year of qualification) 1. The name of the foreign corporation as it appears on the records of the Florida Department of State is: Mobile Biopsy, Inc. 3/29/11 \_\_\_\_ and its Florida document 2. This entity was authorized to transact business in Florida on \_\_\_\_ F11000001351 number is \_\_\_ North Carolina 3. This corporation was formed under the laws of \_\_\_\_\_ 4. The name and address of each officer and/or director is as follows: Title: Name and Address president/CEO Jorgen Madsen 72 Golden Run Rd Bolton, MA 01740 secretary Robert Lombardi 463 Salisbury St Worcester, MA 01609 (Attach additional pages if necessary) president/CEO Title of person signing Jorgen Madsen

**FILING FEE \$35** 

Make checks payable to Florida Department of State and Mail to: Division of Corporations • PO Box 6327 • Tallahassee, FL 32314

CR2E127 (8/08)

Typed or printed name of person signing