

F 110000002667

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

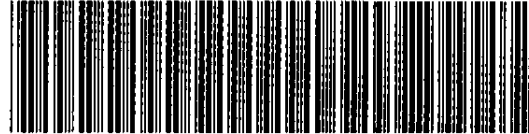
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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W11000028350

6/29/11

COVER LETTER

TO: Filing Section
Division of Corporations

SUBJECT: Ascendant MDx, Inc.
(Name of Foreign Corporation)

Dear Sir or Madam:

The enclosed Foreign Name Registration, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Paul W. Hawran
(Name of Person)

Ascendant MDx, Inc.
(Firm/Company)

2173 Salk Avenue Suite 150
(Address)

Carlsbad, CA 92008
(City/State and Zip Code)

For further information concerning this matter, please call:

Paul W. Hawran at (858) 336-9196
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☐ \$87.50 Filing Fee

☒ \$96.25 Filing Fee & Certified Copy

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

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DIVISION OF CORPORATIONS

May 23, 2011

PAUL W. HAWRAN
2173 SALK AVENUE
SUITE 150
CARLSBAD, CA 92008

SUBJECT: ASCENDANT MDX, INC.
Ref. Number: W11000028356

We have received your document for ASCENDANT MDX, INC. and your check(s) totaling \$96.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

What type filing are you trying to register; a Foreign Name Registration or do you intend to qualify to do business in Florida.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 911A00012746

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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.

1. ASCENDANT MDX 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. CALIFORNIA (C3330232) 3. 27-3950390
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/10/2010 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 26842 HAGGERTY ROAD FARMINGTON HILLS MI 48331-5715
(Principal office address)
2173 SALK AVE. STE. 150 CARLSBAD, CA 92008
(Current mailing address)

8. INDEPENDENT CLINICAL LABORATORY
(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: NORMA MARTINEZ

Office Address: 4374 GEVALIA DR.

BROOKSVILLE, Florida 34604
(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.

Norma Martinez
(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.

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

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DIVISION OF CORPORATIONS

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A. DIRECTORS

Chairman: ~~PAUL HAWRAN~~ HARRY STULLI

Address: 26842 HAGGERTY ROAD
FARMINGTON HILLS MI 48331-5715

Vice Chairman: PAUL HAWRAN

Address: 26842 HAGGERTY ROAD
FARMINGTON HILLS MI 48331-5715

Director: ALAN MACK

Address: 26842 HAGGERTY ROAD
FARMINGTON HILLS MI 48331-5715

Director: HOWARD SLUTSKY

Address: 26842 HAGGERTY ROAD
FARMINGTON HILLS MI 48331-5715

B. OFFICERS

President: PAUL HAWRAN

Address: 26842 HAGGERTY ROAD
FARMINGTON HILLS MI 48331-5715

Vice President:

Address:

Secretary:

Address:

Treasurer:

Address:

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

13. 
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. PAUL H. HAWRAN - PRESIDENT

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

State of California
Secretary of State

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CERTIFICATE OF STATUS

ENTITY NAME:

ASCENDANT MDX, INC.

FILE NUMBER: C3330232
FORMATION DATE: 11/10/2010
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of May 16, 2011.

Debra Bowen

DEBRA BOWEN
Secretary of State