

F116000446683

Florida Department of State
 Division of Corporations
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To: Division of Corporations
 Fax Number : (850) 617-6380

From: Account Name : C T CORPORATION SYSTEM
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**COR AMND/RESTATE/CORRECT OR O/D-RESIGN
 NTD LABORATORIES, INC.**

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NC 2/27/13

RE-SUBMIT

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Date of submission 2/26

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NTD Laboratories, Inc.
Name of Corporation

DOCUMENT NUMBER: F11000004423

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jessica J. Pearl
Name of Contact Person

PerkinElmer
Firm/Company

940 Winter Street
Address

Waltham, MA 02451
City/State and Zip Code

jessica.pearl@perkinelmer.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jessica J. Pearl at (781) 663-6900
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$35.00 Filing Fee
- \$43.75 Filing Fee & Certificate of Status
- \$43.75 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
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



February 26, 2013

FLORIDA DEPARTMENT OF STATE
Division of Corporations

NTD LABORATORIES, INC.
940 WINTER ST
ATTN: J PEARL
WALTHAM, MA 02451

SUBJECT: NTD LABORATORIES, INC.
REF: F11000004423

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refile this document until the quality has been improved.

Please return 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) 245-6050.

Carol Mustain
Regulatory Specialist II

FAX Aud. #: H13000044668
Letter Number: 313A00004648

RE-SUBMIT

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date of submission 2/26

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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO
APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

F11000004423

(Document number of corporation (if known))

1. NTD Laboratories, Inc.
(Name of corporation as it appears on the records of the Department of State)
2. New York 3. 11/03/2011
(Incorporated under laws of) (Date authorized to do business in Florida)

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SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 12/19/2012

5. PerkinElmer Labs, Inc.
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

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

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

(Signature of a director, president or other officer, if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

John L. Healy
(Typed or printed name of person signing)

Secretary
(Title of person signing)

State of New York
Department of State } ss:

I hereby certify, that a Certificate of Amendment of NTD LABORATORIES, INC., changing its name to PERKINELMER LABS, INC., filed in this Department on 12/19/2012.



*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 22nd day of February two
thousand and thirteen.*

A handwritten signature in black ink, appearing to read "Neil A. ...", is written over a faint circular stamp.

First Deputy Secretary of State

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