

F12000003688

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

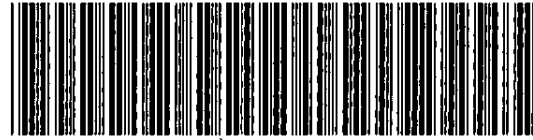
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

12 SEP - 7 AM 10:23

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J. Shivers (CD) 11/11/12

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 14, 2012

RAJNISH MITTAL
60 PINEVIEW DR
BUFFALO, NY 14228

SUBJECT: IMMCO DIAGNOSTICS, INC
Ref. Number: W12000022336

We have received your document for IMMCO DIAGNOSTICS, INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6052.

Justin M Shivers
Regulatory Specialist II
New Filing Section

Letter Number: 912A00012422

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Immeo Diagnostics, 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:

Rajnish Mittal
Name of Person

Immeo Diagnostics, Inc.
Firm/Company

60 Pineriew Drive
Address

Buffelo, NY 14228
City/State and Zip code

rmittal@immeo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rajnish Mittal at (716) 691-0091
Name of Person Area Code & Daytime Telephone Number

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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

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate 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. Immco Diagnostics 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. Delaware, US 3. 16-1012347
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/14/2007 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 60 Pineview Drive Buffalo NY 14228
(Principal office address)

60 Pineview Drive Buffalo NY 14228
(Current mailing address)

8. to perform clinical sample testing for diagnosis of autoimmune diseases & oral pathology.
(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: InCorp Services, Inc

Office Address: 17888 67th Court North
Loxahatchee, Florida 33470
(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.

[Signature] on behalf of InCorp Services, Inc.
(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: William Maggio

Address: 60 Pineview Drive
Buffalo, NY 14228

Vice Chairman: _____

Address: _____

Director: Mark A. deLaar

Address: Summit Partners
222 Berkeley St. 18th Floor, Boston MA

Director: _____

Address: _____

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B. OFFICERS

President: William Maggio

Address: 60 Pineview Dr
Buffalo, NY 14228

Vice President: _____

Address: _____

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TALLAHASSEE FLORIDA

Secretary: Kevin Lawson

Address: 60 Pineview Dr. Buffalo NY 14228

Treasurer: Rajnish Mittal

Address: 60 Pineview Dr. Buffalo NY 14228

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 §.817.155, F.S.

14. Rajnish Mittal Chief Financial Officer
(Typed or printed name and capacity of person signing application)

State of New York
Department of State } ss:

I hereby certify, that IMMCO DIAGNOSTICS, INC. a DELAWARE corporation, doing business in the State of New York under the fictitious name of IMMCO DIAGNOSTICS DELAWARE filed an Application for Authority to do business in the State of New York on 11/19/2007. I further certify that so far as shown by the records of this Department, such corporation is still authorized to do business in the State of New York.



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TALLAHASSEE FLORIDA

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 29th day of August two thousand and twelve.

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

First Deputy Secretary of State