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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : CORPORATION SERVICE COMPANY
Account Number : 120000000195
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TALLAHASSEE, FLORIDA

**FOREIGN PROFIT/NONPROFIT CORPORATION
FOUNDATION MEDICINE, INC.**

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MRS 10/19/12

**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. Foundation Medicine, 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

(State or country under the law of which it is incorporated)

3. 27-1316416

(FEI number, if applicable)

4. November 12, 2009

(Date of incorporation)

5. Perpetual

(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. One Kendall Square, Suite B3501, Cambridge, MA 02139

(Principal office address)

One Kendall Square, Suite B3501, Cambridge, MA 02139

(Current mailing address)

8. Cancer diagnostic company

(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: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee

(City)

, Florida 32301

(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.

Corporation Service Company

By: _____

(Registered agent's signature)

Asst. V.P.

Timothy J. O'Brien

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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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: See attached Exhibit A

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: See attached Exhibit A

Address: _____

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. _____

ROBERT W. HESSLEIN

Secretary

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

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Exhibit A
toApplication by Foreign Corporation for
Authorization to Transact Business in FloridaSECRETARY OF STATE
TALLAHASSEE, FLORIDA

12. name and businesses addresses of officers and/or directors:

A. DIRECTORS

DIRECTORS	Alexis Borisy	One Kendall Square, Suite B3501 Cambridge, MA 02139
	Brook Byers	One Kendall Square, Suite B3501 Cambridge, MA 02139
	Mark Levin	One Kendall Square, Suite B3501 Cambridge, MA 02139
	Michael Pellini	One Kendall Square, Suite B3501 Cambridge, MA 02139
	David Schenkein	One Kendall Square, Suite B3501 Cambridge, MA 02139
	Krisna Yeshwant	One Kendall Square, Suite B3501 Cambridge, MA 02139

B. OFFICERS

President	Michael Pellini	One Kendall Square, Suite B3501 Cambridge, MA 02139
Treasurer	Jason Ryan	One Kendall Square, Suite B3501 Cambridge, MA 02139
Secretary	Robert Hesslein	One Kendall Square, Suite B3501 Cambridge, MA 02139

Delaware

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FOUNDATION MEDICINE, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTEENTH DAY OF OCTOBER, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FOUNDATION MEDICINE, INC." WAS INCORPORATED ON THE TWELFTH DAY OF NOVEMBER, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

4725817 8300

121141922

You may verify this certificate online
at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 9925560

DATE: 10-18-12