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(Requestor's Name)				
(Address)				
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(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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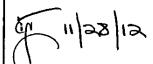


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SECRETARY OF STATE



<u>VIA U.S. FIRST CLAŠŠ MAIL</u>

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

Re: Hologic, Inc.'s Foreign Qualification

Dear Sir/Madam:

Enclosed, for your review and approval, are the following documents submitted on behalf of Hologic, Inc.:

- 1. Application by Foreign Corporation for Authorization to Transact Business in Florida;
- 2. Certificate of Good Standing; and
- 3. Check in the amount of \$70.00 to cover the filing fee.

Should you have any questions or if you are in need of further information/documentation, kindly contact me via any of the methods listed below.

Thank you in advance for your consideration. I look forward to receiving your approval letter.

Sincerely,

Alisha Hankins'

Corporate Paralegal

Enclosures

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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.

Hologic, Inc.			
	corporation; must include "INCORPORATE Corp," "Inc," "Co," or "Corp.")	ED," "COMPANY," "CORPORATION,"	
(If name unavail	lable in Florida, enter alternate corporate nar	me adopted for the purpose of transacting business in Florida)	<u> </u>
Delaware		3. 04-2902449	
State or country	under the law of which it is incorporated)	(FEI number, if applicable)	
1/18/1990		5. Perpetual	
(Date	e of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	_
		ss in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)	_
35 Crosby Dr	ive, Bedford, MA 01730		_
	(Principal office a	address)	
250 Campus I	Orive, Marlborough, MA 01752		_
	(Current mailing a	address)	
	the manufacture, sale, research and d		_ 3
(Purpose(s	s) of corporation authorized in home state or	r country to be carried out in state of Florida)	<u>.</u>
Name and street	et address of Florida registered agent: (I	P.O. Box NOT acceptable)	
Name:	Corporation Service Company		000
fice Address:	1201 Hays Street		POFA
	Tallahassee	, Florida 32301	

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

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: See attached in the properties of the p	Rider I. FILEU SEURE FARY OF STATE NIVISCUS OF CORPORATIONS
A. DIRECTORS	
Chairman:	· ,
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President:	
Address:	
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If negersary, you may attach an addendum to the application listing a	additional officers and/or directors.
13. Signature of Director or Officer	
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 are true and that he or she is aware that false information submitted in a docur third degree felony as provided for in s.817.155, F.S.	above) affirms that the facts stated herein
Mark J. Casey, SVP, Chief Administrative Officer, General Counse	el and Secretary

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

Rider 1

To Hologic, Inc.'s Application by Foreign Corporation for Authorization to Transact Business in Florida

A. DIRECTORS

- Robert A. Cascella
 250 Campus Drive, Marlborough, MA 01752
- Glenn P. Muir
 Crosby Drive, Bedford, MA 01730
- Sally W. Crawford
 250 Campus Drive, Marlborough, MA 01752
- John W. Cumming
 250 Campus Drive, Marlborough, MA 01752
- David R. LaVance, Jr.
 250 Campus Drive, Marlborough, MA 01752
- Nancy L. Learning
 250 Campus Drive, Marlborough, MA 01752
- Lawrence M. Levy
 250 Campus Drive, Marlborough, MA 01752
- 8. Elaine S. Ullian 250 Campus Drive, Marlborough, MA 01752
- 9. Wayne Wilson 250 Campus Drive, Marlborough, MA 01752

A. OFFICERS

- Robert A. Cascella, President and Chief Executive Officer 250 Campus Drive, Marlborough, MA 01752
- Glenn P. Muir, Executive Vice President, Finance and Administration, Chief Financial Officer, Assistant Treasurer and Assistant Secretary 35 Crosby Drive, Bedford, MA 01730
- Mark J. Casey, Senior Vice President, Chief Administrative Officer, General Counsel and Secretary
 Campus Drive, Marlborough, MA 01752

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Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "HOLOGIC, 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 TWENTY-FIFTH DAY OF OCTOBER, A.D.

2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HOLOGIC, INC." WAS INCORPORATED ON THE EIGHTEENTH DAY OF JANUARY, A.D. 1990.

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.

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AUTHENTY CATION: 9942671

DATE: 10-25-12

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