

F13000004914

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

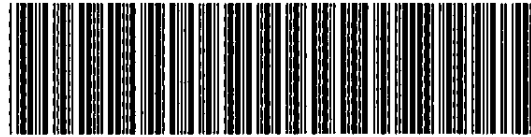
(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: LABS, Inc.

Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Ann Niedzinski

Name of Person

LABS, Inc.

Firm/Company

6933-B South Revere Parkway

Address

Centennial, CO 80112

City/State and Zip Code

ann_niedzinski@labs-inc.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ann Niedzinski

Name of Person

at (720) 528-4774

Area Code & Daytime Telephone Number

MAILING ADDRESS:
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 30, 2013

ANN NIEDZINSKI
6933-B SOUTH REVERE PARKWAY
CENTENNIAL, CO 80112

SUBJECT: LABS, INC.
Ref. Number: W13000060381

We have received your document for LABS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is distinguishable on our records. However, the name is similar to a name already on file with this office. Therefore, the use of this name may result in future complications. The name of the existing entity is : , document number .

You may 1.) resubmit the document under the current name; or 2.) choose to file under another name. If you choose to file under another name, please make the appropriate correction throughout the document(s).

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.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 513A00025312

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO
CONDUCT ITS AFFAIRS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN
THE STATE OF FLORIDA:*

1. LABS, Inc.

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

2. Delaware

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

3. 26-0718373

(FBI number, if applicable)

4. August 13, 2007

(Date of Incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6.

(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 6933-B South Revere Parkway Centennial, CO 80112

(Principal office address)

6933-B South Revere Parkway Centennial, CO 80112

(Current mailing address)

8. Laboratory Testing on samples that originate in the State of Florida

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: CT Corporation System

Office Address: 1200 South Pine Island Road

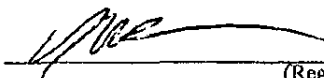
Plantation, Florida 33324

(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.



by: Dorie Kluess, Asst Sec

(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 addresses of officers and/or directors

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DIVISION OF CORPORATION
2013 NOV 12 PM 7:26

A. DIRECTORS

Chairman: Olivia Thompson

Address: 6278 S. Troy Circle

Centennial, CO 80111

Vice Chairman: N/A

Address: _____

Director: Steve Urdahl

Address: 1102 24th Street

Golden, CO 80401

Director: Ray Swanson

Address: 6933-B South Revere Parkway

Centennial, CO 80112

B. OFFICERS

President: Ray Swanson

Address: 6933-B South Revere Parkway

Centennial, CO 80112

Vice President: N/A

Address: _____

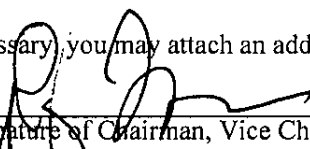
Secretary: Ray Swanson

Address: 6933-B South Revere Parkway Centennial, CO 80112

Treasurer: N/A

Address: _____

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

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Ray Swanson, CEO/President of LABS, Inc.

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

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LABS, 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. 2013.

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2013 NOV 12 PM 7:26

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 0827085

DATE: 10-18-13



F13000004914

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned OLIVIA THOMPSON, do hereby certify
(Name)

that this Resolution of the Board of Directors of LABS, INC.

(Corporate Name)

a corporation duly organized and existing under the laws of the State of DELAWARE

was duly adopted on AUGUST 13, 2007

Be it resolved, that LABS, INC.
(Corporate Name)

organized and existing in the State of DELAWARE, hereby adopts the name

LABS, INC. OF COLORADO for use in Florida.

Dated: 11/11/13

Olivia M Thompson

Signature of either Chairman, Vice Chairman or any officer

OLIVIA M THOMPSON
Type or print name

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314