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**Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**

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To:

Division of Corporations
Fax Number : (850) 617-6381

RE-SUBMIT

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

Please retain original filing
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED

14 JUL 14 PM 2:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**FOREIGN PROFIT/NONPROFIT CORPORATION
BIORELIANCE CORPORATION**

Certificate of Status	0
Certified Copy	0
Page Count	067
Estimated Charge	\$1,020.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 JUL -8 PM 1:44

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Corporate Filing Menu

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7/14/2014 13:52:00 From: To: 8506176381

(2/7)

850-617-6381 7/9/2014 11:55:50 AM PAGE 1/001 Fax Server



July 9, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: BIORELIANCE CORPORATION
REF: W14000042166

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

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

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) 245-6052.

Jessica A Fason
Regulatory Specialist II

FAX Aud. #: H14000163080
Letter Number: 314A00014746

RE-SUBMIT

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date of submission 7/8

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: BioReliance Corporation

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:

Joe Gilley, State Tax Manager

Name of Person

Sigma-Aldrich

Firm/Company

3050 Spruce St.

Address

St. Louis, MO 63103

City/State and Zip code

joseph.gilley@sia.com

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

For further information concerning this matter, please call:

Joe Gilley

at (314) 286-7731

Name of Person

Area Code & Daytime Telephone Number

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. BioReliance Corporation

(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

3. 52-1541583

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

(FEI number, if applicable)

4. 12/16/1996

5. perpetual

(Date of incorporation)

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

6. 10/31/2011

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

7. 14920 Bruschart Rd., Rockville MD 20850

(Principal office address)

Attn: Tax Department, 3050 Spruce St., St. Louis MO 63103

(Current mailing address)

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

Name: NRAI Services, Inc.

Office Address: 1200 South Pine Island Road

Plantation

Florida 33324

(City)

(Zip code)

9. 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: Cathi J. Wall Cathi J. Wall, Asst Secy
(Registered agent's signature)

10. 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.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED

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

A. DIRECTORS

Chairman: Gilles Cottier

Address: 3050 Spruce St.

St. Louis MO 63103

Vice Chairman: Archie Cullen

Address: 14920 Broschart Rd.

Rockville MD 20850

Director: Michael Kanan

Address: 3050 Spruce St.

St. Louis MO 63103

Director: _____

Address: _____

B. OFFICERS

President: Archie Cullen

Address: 14920 Broschart Rd., Rockville MD 20850

Vice President: Michael Kanan

Address: 3050 Spruce St., St. Louis MO 63103

Secretary: William Sardella

Address: 14920 Broschart Rd., Rockville MD 20850

Treasurer: Michael Kanan

Address: 3050 Spruce St., St. Louis MO 63103

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

12. _____

(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.

13. George Miller, Assistant Secretary

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

14 JUL -8 PM 1:45
TALLAHASSEE FLORIDA
SECRETARY OF STATE

Addendum to:
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA

BioReliance Corporation
52-1541583

B. Officers (continued)

Assistant Secretary: George Miller
Address: 3050 Spruce St., St. Louis Mo 63103

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BIORELIANCE CORPORATION" 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 EIGHTH DAY OF JULY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BIORELIANCE CORPORATION" WAS INCORPORATED ON THE SIXTEENTH DAY OF DECEMBER, A.D. 1996.

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.

SECRETARY OF STATE
JALAHASSI FLORIDA

14 JUL -8 PM 1:45

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140927920

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



Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1515792

DATE: 07-08-14