

F14000003876

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

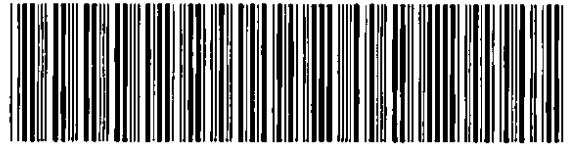
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2023 JUL 28 AM 9:43

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

RECEIVED

2023 JUL 28 PM 3:31

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

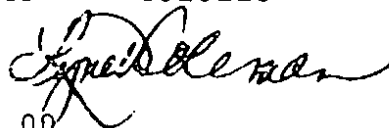
CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 908943 4816118

AUTHORIZATION :

COST LIMIT : \$ 35.00



ORDER DATE : July 28, 2023

ORDER TIME : 2:21 PM

ORDER NO. : 908943-025

CUSTOMER NO: 4816118

FOREIGN FILINGS

NAME: LABCORP PERI-APPROVAL AND
COMMERCIALIZATION INC.

XX CORPORATE
 LIMITED PARTNERSHIP
 LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER: _____

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

F14000003876

(Document number of corporation (if known))

1. LABCORP PERI-APPROVAL AND COMMERCIALIZATION INC.

(Name of corporation as it appears on the records of the Department of State)

2. Delaware

(Incorporated under laws of)

3. 09/12/2014

(Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? _____

5. Fortrea Patient Access Inc.

(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:
change of directors and officers of the Corporation

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Director			
Asst. Treasurer	Robert S. Pringle	206 CARNEGIE CENTER	<input type="checkbox"/> Add
Senior Vice President		PRINCETON, NJ 08540	<input checked="" type="checkbox"/> Remove
Director	Paul R Kirchgraber	9801 Washingtonian Boulevard 9th Floor	<input type="checkbox"/> Add
		Gaithersburg, MD 20878	<input checked="" type="checkbox"/> Remove
Director			
Secretary	Sandra D van der Vaart	531 South Spring Street	<input type="checkbox"/> Add
Senior Vice President		Burlington, NC 27215	<input checked="" type="checkbox"/> Remove
Senior Vice President	William Hanlon	206 Carnegie Center	<input type="checkbox"/> Add
Authorized Signer		Princeton, NJ 08540	<input checked="" type="checkbox"/> Remove
Director	Jill McConnell	8 Moore Drive, Durham, NC 27703	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

DocuSigned by:

Mark Morais

MD-03747569402

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Mark Morais

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE \$35.00

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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Continuation page

Item 9

Director, VP & Treasurer	Amedeo De Risi	8 Moore Drive, Durham, NC 27703	Add
Director & Secretary	David Cooper	8 Moore Drive, Durham, NC 27703	Add
President	Mark Morais	8 Moore Drive, Durham, NC 27703	Add
Vice President	Mark Roseman	8 Moore Drive, Durham, NC 27703	Add
Vice President	Lynne Sager	8 Moore Drive, Durham, NC 27703	Add
General Counsel	Stillman Hanson	8 Moore Drive, Durham, NC 27703	Add
Assistant Secretary	Erica Smith-Klocek	8 Moore Drive, Durham, NC 27703	Add
Chief Accounting Officer	Amanda Warren	8 Moore Drive, Durham, NC 27703	Add

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COUNTY OF STATE
TALLAHASSEE, FLORIDA

Delaware

The First State


Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "LABCORP PERI-APPROVAL AND COMMERCIALIZATION INC.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "FORTREA PATIENT ACCESS INC." ON THE TWENTY-EIGHTH DAY OF APRIL, A.D. 2023, AT 9:34 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF AMENDMENT IS THE FIRST DAY OF MAY, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.




Jeffrey W. Bullock, Secretary of State

2553887 8320
SR# 20233110346

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

Authentication: 203848541
Date: 07-28-23