F15000002777

, (Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	o.#)
(Oit	y/State/Zip/Filone	7 m)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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JUN 2 5 2015 J SHIVERS

COVER LETTER

TO: New Filing Section Division of Corporation			
SUBJECT: MDX	Medical, Inc.		
		ion - must include suffix	
Dear Sir or Madam:			
"Certificate of Existence,		for Authorization to Transa Standing and check are sub siness in Florida.	
Please return all correspo	ndence concerning this ma	tter to the following:	
Eric Gross			
	Name	of Person	
Vitals			
	Firm/C	Company	
160 Chubb A	Avenue		
	Ac	ldress	
Lyndhurst, N	J 07071		
	City/Stat	e and Zip code	
eric.gross@vi			
	E-mail address: (to be us	ed for future annual report	notification)
For further information e	oncerning this matter, plea	se call:	
Eric Gross	at (201	1, <u>696-3006</u>	
Name of Person	\.\(\frac{1}{\triangle}\)	ea Code & Daytime Teleph	none Number
	RIER ADDRESS:	MAILING A	
New Filing Section Division of Corporations		New Filing Section Division of Corporations	
Clifton Building		P.O. Box 6327	
2661 Executive C Tallahassee, FL		Tallahassee, I	FL 32314
Enclosed is a check for th	ne 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.

(Enter name of "Inc.," "Co.," "	corporation; must include "11 Corp." "Inc," "Co," or "Corp.	VCORPORATED," ")	"COMPANY," "CORPORATION,"	
		te corporate name a	dopted for the purpose of transacting t	ousiness in Florida)
Delawa	re	3.		
	ry under the law of which it i	s incorporated)	(FEI number, if applicable)	
June 6,	2006	5.	perpetual	
(Dat	e of incorporation)		(Duration: Year corp. will ocase to ex	tist or "perpennal")
April 21	, 2015			
	bb A <mark>ve</mark> nue Ly	ndhurst, N	ess)	FEC!!
		irrent mailing addre		
Name and <u>stre</u> Name:	Corporation Sen	vice Compan		24 PM 3: 55 RY OF STATE SSEE FLORIDA
fice Address:			00004	⊬ =
fice Address:	Tallahassee		, _{Florida} 32301	

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.

Brandy Vendrick Brandy Vendrick 6-17-15
(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.

11 Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: see attached Address: ____ Vice Chairman: Address: _ Address: Director: **B. OFFICERS** President: Heyward Donigan Address: 160 Chubb Avenue Lyndhurst, NJ 07071 Vice President: Tony Bellomo Address: 160 Chubb Avenue Lyndhurst, NJ 07071 Secretary: Bryan Perler 160 Chubb Avenue Lyndhurst, NJ 07071 Treasurer: NOTE: If necessary you may attach an addendum to the application listing additional officers and/or directors. 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. Bryan Perler - CFO

Vitals Board Members Jan 2015

Name	Name Address	
Bill Sullivan	Brighton Health Group One Canterbury Green 201 Broad Street, 14th Floor Stamford; CT 06901	
	135 Five Mile River Road Darien, CT 06820	
Brandon Hull	230 Nassau Street Princeton, NJ 08542	
Todd Pietri	551 Madison Ave, 7th Floor New York, NY 10022	
Douglas Boake	1 Montgomery Street, Suite 700 San Francisco, CA 94104	
	2732 Vallejo Street San Francisco, CA 94123	
Tom Schnettler	800 Nicollet Mall, J10N01 Suite 1000 Minneapolis, MN 55402	
David Tamburri	565 Fifth Avenue, 26th Floor New York, New York 10017	
Richard Forman	145 West 67th Street, Apt PH-H New York, NY 10023	
Sandra Panem	Needham Suite 300 445 Park Avenue New York, NY 10022	
Alan Patricof	Greycroft, LLC 292 Madison Avenue, 20th Floor New York, NY 10017	
, Jeff Boyd	One Canterbury Green 201 Broad street, 14th floor, Stamford, CT	
Tom McKinley	345 California Street Sulte 1710 San Francisco, CA 94104	

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "MDX MEDICAL, 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 SEVENTEENTH DAY OF JUNE,
A.D. 2015.

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

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MDX MEDICAL, "
INC." WAS INCORPORATED ON THE SIXTH DAY OF JUNE, A.D. 2006.

PH 3: 55 OF SIAIE E.FLORIDA

4170635 8300

150935981

Jeffrey W. Bullock, Secretary of State

AUTHENTY CATION: 2475439

DATE: 06-17-15

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