Division of Corporations 8/4/2020

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FOREIGN PROFIT/NONPROFIT CORPORATION NORTHWELL HEALTH LABORATORIES

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August 5, 2020

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: NORTHWELL HEALTH LABORATORIES

REF: W20000085150

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 name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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Tracy L Lemieux Regulatory Specialist II FAX Aud. #: H20000261601 Letter Number: 520A00014676

### 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:

(Name of corpo	ana na with alandu indicata that i	CORPORATION  NCORPORATED" or "CORPORATION" or it is a corporation instead of a natural person or you be used as a corporate suffix by a nonprince of the corporate of the corpo	r namership if not so contained
(If name unav	ailable in Florida, enter alternate	e corporate name adopted for the purpose of tr	unsacting business in Florida)
2. NEW YORK		3, 11-3412370	YF
(State or cou	ntry under the law of which it is	incorporated) (FEI number,	if applicable)
4. DECEMBER (I	1, 1997 Date of Incorporation)	5. (Date of duration,	if other than perpetual)
6		registration. See sections 617,1501 & 617,1502	E C and describe the field that
(Date first cond	fucted affairs in Florida it prior to	registration. See sections 017,1307. & 017,1302	, F.S. to determine penasy trabitity (
7. <u>C/O NORTH</u>	WELL HEALTH, INC., ATTN:	OFFICE OF LEGAL AFFAIRS, 2000 MARG	CUS AVENUE, NEW HYDE
		(( melpat office <u>street</u> address)	
	(1	Current mailing address, if different)	· · · · · · · · · · · · · · · · · · ·
·			·
8. TO PROVIDE	DIAGNOSTIC AND CLINIC	AL LABORATORY SERVICES	
(Purpose(s) of	corporation authorized in home	state or country to be carried out in the state of	i Florida) .
9. Name and sti	reet address of Florida registe	ered agent: (P.O. Box NOT acceptable)	
Nama:	CT Corporation System		·
			- 2
Office Address:	1200 South Pine Island Road		
	Plantation	Florida 33324 (Zip Co	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
	(City)	(Sip Co	ode)
10. Registeres	d agent's acceptance:		The state of the s
Havino heen no	amed as registered agent and	to accept service of process for the above	e stated corporation at the place
further apree to	o comply with the provisions	ept the appointment as registered agent a of all statutes relative to the proper and d	complete perjormance oj my akt
and I am famil	iar with and accept the oblig	ations of my position as registered agent.	i 😛
	CT Corporation System		• • • • • • • • • • • • • • • • • • •
	By: Killah Janghe	Kimberly Laughrey, Asst. Se	ec.
		(Registered agent's signature)	<del></del> _

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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6)

A. DIRECTO	RS	٠					
<b>⊡</b> Chairman -	Name: MARK J. SOLAZZO		□Chairman	Name: DAVID BATTINELLI, M.D.			
OVice Chairman	Address: 2000 MARCUS AVENUE		□Vice Chairman	Address: 2000 MARCUS AVENUE			
Director	NEW HYDE PARK, NY 11042		<b>⊠</b> Director	NEW HYDE PARK, NY 11042			
□President			□President				
□Vice President			□Vice President				
☐Scoretary	□ Treasurer		DSecretary .	□Treasurer			
Other:	Other:	٠	Other:	Other:			
□ Chairman	Name: MERRYL SIEGEL		Chairman	Name: MICHELE CUSACK			
□Vice Chairman	Address: 2000 MARCUS AVENUE		□Vice Chairman	Address: 2000 MARCUS AVENUE			
<b>⊠</b> Director	NEW HYDE PARK, NY 11042		<b>⊠</b> Director	NEW HYDE PARK, NY 11042			
□President	·		□President				
□Vice President			□Vice President				
■Secretory	□Treasurer		□Secretary	<b>⊠</b> Treasurer			
Other:	Other:		🗅 Other:	Other:			
□Chairman	Name: LAURENCE A. KRAEMER		☐Chairman	Name: DWAYNE BREINING			
□Vice Chairman	Address: 2000 MARCUS AVENUE		☐ Vice Chairman	Address: 2000 MARCUS AVENUE			
☑Director	NEW HYDE PARK, NY 11042		□Director	NEW HYDE PARK, NY 11042			
□President			□President				
□Vice President			□Vice President				
☐Secretary	☐Treasurer		□Sceretary	☐ Treasurer			
Other. ASST S	ECRET Other:		☑ Other: CEO	Other;			
NOTE: Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only.  Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.  13.  Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)							
14. LAURENCE A. KRAEMER, ASSISTANT SECRETARY  (Typed or printed name and capacity of person signing application)							

#### NORTHWELL HEALTH LABORATORIES CORPORATION

#### Additional Members of the

#### **Board of Directors**

Joan Crawford, M.D.

Address: 2000 Marcus Avenue, New Hyde Park, New York 11042

Donna Drummond

Address: 2000 Marcus Avenue, New Hyde Park, New York 11042

Howard Gold

Address: 2000 Marcus Avenue, New Hyde Park, New York 11042

Eugene Tangney

Address: 2000 Marcus Avenue, New Hyde Park, New York 11042

# State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of NORTHWELL HEALTH LABORATORIES was filed on 12/01/1997, under the name of NORTH SHORE HEALTH SYSTEM LABORATORIES, as a Not-for-Profit Corporation and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

A Certificate of Amendment NORTH SHORE HEALTH SYSTEM LABORATORIES, changing its name to NORTH SHORE-LONG ISLAND JEWISH HEALTH SYSTEM LABORATORIES, was filed 12/03/1998.

A Certificate of Amendment WORTH SHORE-LONG ISLAND JEWISH HEALTH SYSTEM LABORATORIES, changing its name to NORTHWELL HEALTH LABORATORIES, was filed 05/20/2016.



Witness my hand and the official seal of the Department of State at the City of Albany, this 03rd day of August two thousand and twenty.

Brendan C. Hughes

Executive Deputy Secretary of State

Bruken C. Hylan

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