Document Number Only C T CORPORATION SYSTEM 660 East Jefferson Street Requestor's Name Tallahassee, Florida 32301 Address (850) 222-1092 200003045752 Phone City State Zip *****35.00 *****35.00 CORPORATION(S) NAME () Profit () Merœe () Amendment () NonProfit () Limited Liability Company () Dissolution/Withdrawal () Foreign ري () Annual Report () Limited Partnership /Change of R.A. () Fict. Filing () Reinstatement () Fict. Filing Cancel) UCC-1 UCC-3) Limited Liability Partnershi () Photo Copies () Certified Copy () Call if Problem () After () Call When Ready Pick § () Will Wait Walk In () Mail Out Plesse Religion Name Availability Filed Stands Document Thanks, Melânie Examiner NOV 16 Updater Verifier Acknowledgment W.P. Verifier CR2E031 (1-89)

Florida Department of State, Jim Smith, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of submits the following statement in order to change its registered office
or registered agent, or both, in the State of Florida.
1a. The name of the corporation is: NEOPATH, INC.
1b. Date of incorporation in Fla 10-9-97 Document number F87000085302
2. The name and address of the current registered agent and office:
Corporation Service Company
1201 Hays Street, Tallahassee, FL 32301-2525
3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable) C T CORPORATION SYSTEM
c/o C T CORPORATION SYSTEM, 1200 South Pine Island Rd., Plantation Florida 33324
The street address of its registered agent and the street address of the business office of its registered agent as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.
SIGNATURE (Type or printed name and title)
DATE
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 OBJUGATION OF MY POSITION AS REGISTERED ACCENT.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

SIGNATURE BY: __

DATE _

CR2E045 (7-91)

Filing Fee: \$35.00

(Registered Agent) FARNELL ASSISTANT SECRETARY