L97000000005

Florida Department of State

Division of Corporations

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LIMITED LIABILITY REINSTATEMENT

DKRC, LLC

Certificate of Status	0
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TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L97000000005

1. Limited Liability Company's Name
DKRC, LLC

CR2E041 (1/06)

2. Principal Office Address	3. Mailing Office Address	4. State/Country of Formation
4400 Renaissance Parkway	4400 Renaissance Parkway	Florida, USA
Suite, Apt. #, etc.: Suite L	Suite, Apt. #, etc.: Suite L	5. Date Organized or Qualified To Do Business in Florida: December 20, 1996
City & State: Warrensville Heights, Ohio	City & State: Warrensville Heights, Ohio	6. FEI Number: 65-0718594
Zip: 44128 Country: USA	Zip: 44128 Country:	7. CERTIFICATE OF STATUS DESIRED ☐

8. Name and Address of Current Registered Agent

Name: CT Corporation System
Street Address (P.O. Box Number is Not Acceptable): 1200 South Pine Island Road
Suite, Apt. #, Etc.:
City: Plantation State: FL Zip Code: 33324

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 605, F.S.

Signature of Registered Agent: Jeffrey D. Butterfield Assistant Secretary Date: 12/1/06
REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Managing Members/Managers

Title	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
Mgrm	Regional Diagnostics Holdings, LLC	2665 So. Bayshore Drive, Suite 800	Miami, FL 33133

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 605, F.S. I further certify that when mailing this reinstatement application the reason for its refusal has been eliminated, the limited liability company name satisfies the requirements of section 605.0108, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of Managing Member/Manager: Richard J Kamps Date: 11/30/06 Daytime Phone #: 216-44 8-6098

Typed or printed name of signing Managing Member/Manager: Richard J. Kamps

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