

#### Florida Department of State

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## FLORIDA/FOREIGN LIMITED LIABILITY CO.

Thermo Process Instruments GP, LLC

| Certificate of Status | 0        |
|-----------------------|----------|
| Certified Copy        | 0        |
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### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503. FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Thermo Process Instruments OP, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the atternate name. The atternate name must include "Limited Liability Company," "L.L.C.," "LLC.") 76-0683921 (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) 06-22-2001 (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") HAURD WORL (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 1410 Gillingham Lane Sugar Land, TX 77478 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: ONIX Systems Inc. 8) Wyman Street Waltham, MA 02454 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate unvier oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: To engage in the transaction of any or all lawfut business for which limited liability companies may be authorized under the Florida Statutes. Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) Samuel J. Gesten, Assistant Secretary to ONIX Systems Inc.

Typed or printed name of signee

ALL DESCRIPTIONS

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| 1. The name of the Limited Liability Company is:                     |                   |
|--|-------------------|
| Thermo Process Instruments GP, LLC                                   |                   |
| If name unavailable, the alternate name to be used in the state of I | Florida is:       |
| 2. The name and the Florida street address of the registered agent   | t and office are: |
| C T Corporation System   |                   |
| (Name)   | 882               |
| 1200 South Pine Island Road  | # # F             |
| Florida Street Address (P.O. Box NOT ACC                             | 2PTABLE)          |
| Plantation FL  | 33324             |
| City/State/Zip   |                   |

Having been named as registered agent and to accept service of process for the above stated limited liability company 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

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\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

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# Delaware

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#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELANARE, DO HEREBY CERTIFY "THERMO PROCESS INSTRUMENTS GP, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE POURTEENTH DAY OF NOVEMBER, A.D. 2008.

AND I DO BEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

3406923 8300

081118518

You may verify this cortificate online at corp. delegare, opy/authwar, shtul

Namel Smile Henrason

Harriet Smith Windsor, Secretary of Stat

AUTHENTICATION: 6967479

DATE: 11-14-08