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EXAMINER

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ACCOUNT NO. : I2000000195 REFERENCE : 555248 4336747 AUTHORIZATION : COST LIMIT : \$ 125.00(ORDER DATE: October 26, 2010 ORDER TIME : 4:07 PM ORDER NO. : 555248-030 CUSTOMER NO: 4336747 FOREIGN FILINGS NAME: ESOTERIX GENETIC LABORATORIES, LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY PLAIN STAMPED COPY _ CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Jeanine Reynolds -- EXT# 2933

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION 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:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	`
1 Esoterix Genetic Laboratories, 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 consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabili Company," "L.L.C," "LLC.")	
2. DE 3.	
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)	
4. 08/17/2010 5. Perpetual	
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
6	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. 358 South Main Street, Burlington, NC 27215	
(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:	
F. Samuel Eberts III, 358 South Main Street, Burlington, NC 27215	
William B. Hayes, 358 South Main Street, Burlington, NC 27215	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recording 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 under oath of the translator must be submitted.)	erds in
11. Nature of business or purposes to be conducted or promoted in Florida: Laboratory services	
THE TOR	
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. I am aware that any 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.

F. Samuel Eberts III

Typed or printed name of signee



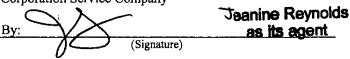
CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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	of the Limited Liability	Company is:	
Esoterix Gene	etic Laboratories, LLC		
If unavailable,	, the alternate to be used	l in the state of Florida is:	
2. The name a	and the Florida street ad	dress of the registered agent and office are:	
	Corporation Service C	Company	
		(Name)	
	1201 Hays Street		
	Florida Stre	eet Address (P.O. Box NOT ACCEPTABLE)	
	Tallahassee	FL 32301	
		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.

Corporation Service Company



\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Delaware

PAGE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "ESOTERIX GENETIC LABORATORIES, 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 FIRST DAY OF NOVEMBER, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ESOTERIX GENETIC LABORATORIES, LLC" WAS FORMED ON THE SEVENTEENTH DAY OF AUGUST, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

4861238 8300

101046370

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

Jeffrey W. Bullock, Secretary of State
AUTHENTY CATION: 8323230

DATE: 11-01-10