# Florida Department of State

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### Foreign Limited Liability Company CELLMARK USA, LLC

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MAY 2 0 2013

T. HAMPTON

CR2E027 (9/10)		cov	ER LETTER		
	stration Section sion of Corporations				
SUBJECT:	Cellmark USA, LLC				•
SOBJECT.		Name of Lin	nited Liability Company		
The enclosed Existence, and	"Application by Foreign Limited I i check are submitted to register th	lability Con a above refe	npany for Authorization to Tr renced foreign limited liabilit	ansact Business in Florida, y company to transact busi	" Centificate of ness in Plorida
Please return a	all correspondence concerning this	matter to the	e following:		
	ANTHONY COSTANZO				,
•	<del></del>	N	ame of Person		
	CELLMARK USA, LLC				
		P	irm/Company		
	333 LUDLOW STREET				
			Address	<u> </u>	
	STAMFORD, CT 06902				
		City/S	tate and Zip Code		
	ANTHONY.COSTANZO@CE	ILLMARK,C	OM	·	•
	E-mail addres	s: (to be use	d for future annual report not	(fication)	•
For further inf	formation concerning this matter, p	leaso call:	•		
ANT	THONY COSTANZO		**	•	
	Name of Person	Are	at () a Code & Daytime Telephone	Number	•
Divis Regis P.O. 1	LING ADDRESS: ion of Corporations stration Section Box 6327 hassee, FL 32314	Divisio Registr Clifton 2661 B	eT ADDRESS: in of Corporations ation Section Building xecutive Center Circle asses, FL 32301		
	a check for the following am 25.00 Filing Fee \$\Bigcup \text{\$\Bigcup\$130.00 F}\$ Certificate	iling Fcc &	□ \$155.00 Filing Fee & Cartified Copy	S160.00 Filing Fee, C of Status & Certified	ertificate Copy

#### 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:				
1. CELLMARK USA, LLC				
(Name of Poreign 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 alternate name. The alternate name must include "Limited Liability				
Company," "L.L.C," "LLC.")				
2. Delaware 3. 99-0362765				
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)				
4. 12/10/2009 5. Perpetual				
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")				
exist of perpetual )				
6. Upon Qualification (Date first transacted business in Florida, if prior to registration.)				
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)				
7. 333 Ludlow Street, Stamford, CT 06902				
7				
(Street Address of Principal Office)				
(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:				
There of the 277 feet and the feet flow feet of the control of the				
Thomas Sliker, 333 Ludlow Street, Stamford, CT 06902				
Ulf Eggefors , 333 Ludlow Street, Stamford, CT 06902				
·				
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 under each of the translator must be submitted.)				
11. Nature of business or purposes to be conducted or promoted in Florida:				
Importer and distirbutor of specialty chemicals.				
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 two. 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.817.135, F.S.)				
Thomas Sliker				
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.

. The name of the Limited Liability Company is:					
ELLMARK USA, LLC					
f unavailable, the alternate to be used in the state of Florida is:					
. The name and the Florida street address of the registered agent and office are:					
C T Corporation System					
. (Name)					
1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE)					
. Plantation FL 33324					
City/State/Zip					
aving been named as registered agent and to accept service of process for the above stated limited ability company at the place designated in this certificate, I hereby accept the appointment as registered gent and agree to act in this capacity. I further agree to comply with the provisions of all statutes lating to the proper and complete performance of my duties, and I am familiar with and accept the oligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.  CT Corporation System  (Signature)  Signature  S 100.00 Filling Fee for Application					
\$ 25.00 Designation of Registered Agent					

30.00 Certified Copy (optional)
5.00 Certificate of Status (optional)

# Delaware

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CELLMARK USA, 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 SEVENTEENTH DAY OF MAY, A.D. 2013.

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

4763182 8300

DATE: 05-17-13