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CR2E027 (9/10)

#### **COVER LETTER**

TO:

Registration Section Division of Corporations

Companion DX Reference Lab, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Steve Blum					
Name of Person .					
Companion DX Reference Lab, LLC					
Firm/Company					
7000 Fannin Street, Suite 1880					
Address	22				
Houston, TX 77030	130 g				
City/State and Zip Code	S 5 5				
steve.blum@companiondxlab.com					
E-mail address: (to be used for future annual report notification)	S 72				
For further information concerning this matter, please call:	80 AU				
Renee Renfroe 713 590-9669					

Name of Person

Area Code & Daytime Telephone Number

#### **MAILING ADDRESS:**

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

#### STREET ADDRESS:

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

■ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status

□ \$155.00 Filing Fee & Certified Copy

□ \$160.00 Filing Fee, Certificate of Status & Certified 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 FORESCIN

LIMIT	ED LIABILITY COMPANY TO TRANSACT BUSINESS IN TI	Œ.	STATE OF FLORIDA:	TCZC V
I. C	ompanion DX Reference Lab, LLC			
*****	(Name of Foreign Limited Liability Company; must incl	ude	"Limited Liability Company," "L.L.C.," or "LLC.")	
conse			of transacting business in Florida and attach a copy of the water name. The alternate name must include "Limited Liability	
, Te	exas	2	45-3214799	
	isdiction under the law of which foreign limited liability ipany is organized)	٥,	(FEI number, if applicable)	
4. 0	6/29/11	5.	perpetual	
-	(Date of Organization)		(Duration: Year limited liability company will cease to exist or "perpetual")	
<sub>6.</sub> u	pon registration			
	(Date first transacted business in F (See sections 608.501 & 608.502 F.:	lori S. to	da, if prior to registration.)	2013
7. 7	000 Fannin Street, Suite 1880		26.24 20.73	001
H	louston, TX 77030		S. S	9
	(Street Addres	s of	Principal Office)	PH
8. lf	limited liability company is a manager-managed	d co	ompany, check here	PM 12: 08
9. TI	ne name and usual business addresses of the ma	nag	ing members or managers are as follows: 😂 🖺 👚	80
<u>}</u>	Kevin Rosenblatt, Steve Blum, Rod Cro	ost	oy, Fred Zeidman, & Daniel Dominquez	
_7	7000 Fannin Street, Suite 1880, Ho	ou	ston, TX 77030	
			nys old, duly authenticated by the official having custody of recision a foreign language, a	ords in
transla	tion of the certificate under cath of the translator must be su	bm	itted.)	
11. 1	Nature of business or purposes to be conducted of	or p	romoted in Florida: healthcare services	
	Signature of a member or an a	uth	orized representative of a member.	
	penalties of perjury that the facts stated herein are to document to the Department of State constitute	rue. Sa	on of this document constitutes an affirmation under the I am aware that any false information submitted in a third degree felony as provided for in s.817.155, F.S.)	
	Steve F	3lui	m	

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 the Limited Liability Company is:  Companion DX Reference Lab, LLC					
If unavailable, the alternate to be used in the state of Florida is:					
2. The name and the Florida street address of the registered agent and office are:	2013				
Capitol Corporate Services, Inc.					
(Name)	007 7				
155 Office Plaza Drive, Suite A	tr.				
Florida Street Address (P.O. Box NOT ACCEPTABLE)					
Tallahassee <sub>FL</sub> 32301	( Section )				
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.

Sadi Boyette, Assistant Secretary on behalf of Capitol Corporate Services, Inc.

(Signafure)

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)



### Office of the Secretary of State

#### **Certificate of Fact**

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Companion DX Reference Lab, LLC (file number 801446156), a Domestic Limited Liability Company (LLC), was filed in this office on June 29, 2011.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on October 15, 2013.





John Steen Secretary of State