Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)222-1092 Phone

Fax Number : (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Foreign Limited Liability Company CARDIONET, LLC

| Certificate of Status | 0 |
|-----------------------|----------|
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| Page Count | 05 |
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C. LEWIS

APR 1 0 2014

Electronic Filing Menu

Corporate Filing Menu

HelpEXAMINER

COVER LETTER

| TO: Registration Section Division of Corporations |
|---|
| SUBJECT: Cavilable LLC Name of Limited Liability Company |
| Watte of Plimiter Transit Comban |
| The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Cartificate 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: |
| Vicole Bioham |
| Name of Person |
| (quality at LLC |
| Plm/Company |
| 1000 Cedar Hollow Rd Sulte 102 |
| Address |
| Mollern PA 19356 |
| City/Sinto and Zip Code |
| nivote, bigham@bicteline, com |
| B-mail address: (to be used for thurs annual report notification) |
| Por further information concerning this matter, please call: |
| Wirole Bighorn at 610 720-5066 Name of Counter Person Area Code Dayling Telephone Number |
| 1 |
| MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations |
| Registration Section Registration Section |
| P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301 |
| Enclosed is a check for the following amount: |
| 23 \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate Certificate of Status Certified Copy of Status & Certified Copy |



(3/5)

14 APR -9 AM 10:31 .

SECRETARY OF STATE TALL AHASSEE, PLORIDA

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| (Name of Foreign Limited Liability Company; max | ust isolude "Limited Usbillity Company," "L.L.C.," or "LL.C.") |
|---|--|
| | |
| friums unavailable, enter alternate name adopted for the purpo- lability Company," "L.L.C," or "L.L.C.") | osa of transacting business in Florida. The alternate name must include "Limited |
| Delaware | 3 33-0604557 |
| (Jurisdiction under the law of which foreign limited liability company is organized) | (Fill number, if applicable) |
| Date fort transactor week | does in Marids If using to registration |
| (Seo sections 603.0904 & 603 | dness in Florids, if prior to registration.) 05.0905, P.S. to determine penalty liability) |
| 1000 Cedar Hollow Drive, Suite 102, Malvern, PA193 | 9355 |
| 10 I | Address of Principal Office) |
| • | Virginia at Lunghii Ottice) |
| Same as above. | |
| | • |
| | (Mailing Address) |
| • | (uttille unacces) |
| . The name, title or capacity and address of the | ne person(s) who has/have authority to manage is/are: |
| , | • |
| iotelemetry, Inc., 1000 Cedar Hollow Drive, Suite 102, | Malvem PA 19355 - Sole Member |
| | |
| | |
| | |
| | |
| Attached is an original certificate of existence. | e, no more than 90 days old, duly authenticated by the official |
| wing custody of records in the jurisdiction under | der the law of which it is organized. (A photocopy is not |
| ceptable. If the certificate is in a foreign langua | page, a translation of the certificate under oath of the translator |
| ust be submitted) | 4 - |
| , | |
| <u>.</u> | |
| M. | |
| | |
| Signature | e of an authorized person |
| recordings with section 605,0203, F.S., the control of this decume | re of an authorized person nent constitutes an affirmation under the penalties of perjury that the facts stated herein are to pertmant of State constitutes a third degree felous as provided for in a.317.155, P.S.) |
| accordance with section 605.0203, P.S., the exception of this docume aware that any false information submitted in a document to the Dope Potes | pent constitutes on affirmation under the penalties of perjury that the facts stated herein are t |

(4/5)

14 APR -9 AM 10:31

SECRETARY OF STATE

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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 Liabilit | y Company is: | |
|---------------|---------------------------|---|---|
| If unavailabl | e, the alternate to be us | ed in the state of Florida is: | |
| 2. The name | and the Florida street | address of the registered agent and office are: | |
| | C T Corporation System | an | |
| • | | (Name) | • |
| | 1200 South Pinc Island | Road | |
| | Florida S | Street Address (P.O. Box NOT ACCEPTABLE) | • |
| | 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 605, Florida Statutes.

> VickiAnn Owens Special Assistant Secretary (Slenature)

> > \$ 100.00 Filing Fee for Application Designation of Registered Agent 25.00 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 THAT THE CERTIFICATE OF CONVERSION OF A DELAWARE CORPORATION "CARDIONET, INC." TO A DELAWARE LIMITED LIABILITY COMPANY OF "CARDIONET, LLC", WAS FILED IN THIS OFFICE ON THE SIXTH DAY OF AUGUST, A.D. 2013, AT 12 O'CLOCK P.M.

DATE: 04-08-14