

M16000001100

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

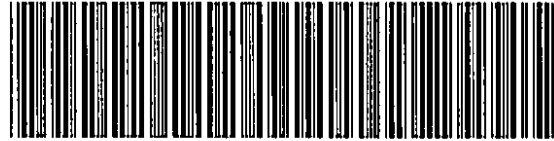
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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DEC 14 PM 2:49
TALLAHASSEE, FLORIDA

2017 DEC 11 AM 9:05
FILED
TALLAHASSEE, FLORIDA

DEC 13 2017
Y SULKER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: VAREX IMAGING WEST, LLC

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CANDIE GUINAN

Name of Person

VAREX IMAGING CORPORATION

Firm/Company

1678 S PIONEER RD

Address

SALT LAKE CITY, UT 84104

City/State and Zip Code

CANDIE.GUINAN@VAREXIMAGING.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CANDIE GUINAN

Name of Person

at (801) 675-7806

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: PERKINELMER MEDICAL IMAGING, LLC

Enter new principal office address, if applicable: 2175 MISSION COLLEGE BLVD

(Principal office address

MUST BE A STREET ADDRESS)

SANTA CLARA, CA 95054

Enter new mailing address, if applicable:

(Mailing address

MAY BE A POST OFFICE BOX)

ATTN: TAX DEPARTMENT

1678 S PIONEER RD

SALT LAKE CITY, UT 84104

2. The Florida document number of this limited liability company is: M16000001100

3. Jurisdiction of its organization: DELAWARE

4. Date authorized to do business in Florida: 02/09/2016

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: VAREX IMAGING WEST, LLC
(must contain "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 contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: CORPORATION SERVICE COMPANY

New Registered Office Address: 1201 HAYS STREET

Enter Florida Street Address

TALLAHASSEE

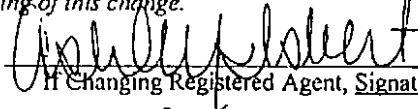
City

Florida 32301

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 relative 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, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, hereby confirm that the limited liability company has been notified in writing of this change.



Ashley Isbert

Assistant Vice President

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17 DEC 14 PM 4:09

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7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

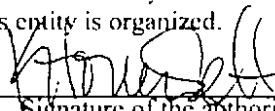
8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

PLEASE SEE ATTACHMENT.

| <u>Title/ Capacity</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|------------------------|-------------|----------------|---------------------------------|
| _____ | _____ | _____ | <input type="checkbox"/> Add |
| _____ | _____ | _____ | <input type="checkbox"/> Remove |
| _____ | _____ | _____ | <input type="checkbox"/> Add |
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| _____ | _____ | _____ | <input type="checkbox"/> Add |
| _____ | _____ | _____ | <input type="checkbox"/> Remove |

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CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.



Signature of the authorized representative

KIMBERLEY HONEYSETT

Typed or printed name of signee

Filing Fee: \$25.00

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF
AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION 8 ATTACHMENT

VAREX IMAGING WEST, LLC (DOCUMENT #M16000001100)

6. If the amendment changes person, title or capacity in accordance with 605.0902(1)(e), indicate that change:

| <u>Title/ Capacity</u> | <u>Name</u> | <u>Address</u> | <u>Add/ Remove</u> |
|---------------------------|------------------------------------|---|--------------------|
| MBR | PERKINELMER MEDICAL HOLDINGS, INC. | 940 WINTER ST., WALTHAM, MA 02451 | REMOVE |
| P | GIAMBATTISTA, BRIAN | 940 WINTER ST., WALTHAM, MA 02451 | REMOVE |
| MANAGER, SECRETARY, VP | HEALY, JOHN L | 940 WINTER ST., WALTHAM, MA 02451 | REMOVE |
| MANAGER, TREASURER | FRANCISCO, DAVID C. | 940 WINTER ST., WALTHAM, MA 02451 | REMOVE |
| VP | ADAMS, DREW C. | 940 WINTER ST., WALTHAM, MA 02451 | REMOVE |
| ASST. TREASURER | ABORN, CHRISTOPHER G. | 940 WINTER ST., WALTHAM, MA 02451 | REMOVE |
| PARENT | VAREX IMAGING CORPORATION | 1678 S PIONEER RD, SALT LAKE CITY, UT 84104 | ADD |
| PRESIDENT | GIAMBATTISTA, BRIAN | 1678 S PIONEER RD, SALT LAKE CITY, UT 84104 | ADD |
| VP, SECRETARY | HONEYSETT, KIMBERLEY E. | 1678 S PIONEER RD, SALT LAKE CITY, UT 84104 | ADD |
| MANAGER, TREASURER | LOWELL, MATTHEW C. | 1678 S PIONEER RD, SALT LAKE CITY, UT 84104 | ADD |

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17 DEC 11 PM 10:49
CLERK OF STATE
TALLAHASSEE, FLORIDA

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VAREX IMAGING WEST, 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 FIFTEENTH DAY OF NOVEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VAREX IMAGING WEST, LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF DECEMBER, A.D. 2015.

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

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line.

Jeffrey W. Bullock, Secretary of State

5914829 8300

SR# 20177003878

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

Authentication: 203571976

Date: 11-15-17

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "PERKINELMER MEDICAL IMAGING, LLC", CHANGING ITS NAME FROM "PERKINELMER MEDICAL IMAGING, LLC" TO "VAREX IMAGING WEST, LLC", FILED IN THIS OFFICE ON THE THIRTY-FIRST DAY OF JULY, A.D. 2017, AT 4:02 O'CLOCK P.M.




Jeffrey W. Bullock, Secretary of State

5914829 8100
SR# 20175496636

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

Authentication: 202979361
Date: 07-31-17

**CERTIFICATE OF AMENDMENT
TO THE
CERTIFICATE OF FORMATION
OF
PERKINELMER MEDICAL IMAGING, LLC**

PerkinElmer Medical Imaging, LLC (the "Company"), a limited liability company organized and existing under and by virtue of the Delaware Limited Liability Act (the "Act"), does hereby certify as follows:

ONE: The original name of the Company is PerkinElmer Medical Imaging, LLC.


TWO: The date on which the original Certificate of Formation of the Company was filed with the Secretary of State of the State of Delaware is December 22, 2015.

THREE: The Sole Member of the Company, acting in accordance with the provisions of Section 18-302 of the Act, adopted resolutions amending its Certificate of Formation as follows (the "Amendment"):

1. Name. The name of the limited liability company formed hereby is "Varex Imaging West, LLC"

FOUR: This Certificate of Amendment of Certificate of Formation shall become effective as of July 31, 2017.

IN WITNESS WHEREOF, the Company has caused this Certificate of Amendment to be signed by its Manager, Secretary and Vice President this 31st day of July, 2017.

By: 
Name: Kim Honeysett
Title: Manager, Secretary and Vice President