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SECRETARY OF STATE (



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 10, 2017

SETH J KATZENSTEIN, ESQ MEDICAL DIAGNOSTIC LABORATORIES, LLC 2439 KUSER ROAD HAMILTON, NJ 08690

SUBJECT: MEDICAL DIAGNOSTIC LABORATORIES, LLC

Ref. Number: W17000040176

We have received your document for MEDICAL DIAGNOSTIC LABORATORIES, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young Regulatory Specialist II

Letter Number: 217A00009288

Received

MAY 1 9 2017

MDL Legal

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

SECRETARY OF STALE
TALL'AHASSEE, FLORIDA

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www.mdlab.com

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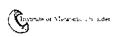




www.ibr-genetics.com



www.venenumbiodesign.com



vww.institute-metabolic-disorders.com



www.invivotek.com



www.bioplastmfg.com



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May 2, 2017

Division of Corporations Registration Section PO Box 6327 Tallahassee, Florida 32314

Re: Medical Diagnostic Laboratories, LLC: Application of Foreign Limited Liability for Authorization to Transact Business in Florida

To Whom It May Concern:

Enclosed please find Medical Diagnostic Laboratories, LLC's ("MDL") application, New Jersey Certificate of Good Standing dated April 21, 2017, and payment for the required filing fees and certificate of status necessary to register MDL as a foreign limited liability company authorized to transact business in Florida.

All questions or requests for additional information should be directed to the undersigned.

Sincerely,

Seth J. Katzenstein, Esq. Associate General Counsel

(609) 528-6175

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SECRETARY OF STATE OF ALLAHASSEE, FLORIDA

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: Medical Diagnostic Laboratories, 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:

Seth J. Katzenstein, Esq.

Name of Person

Medical Diagnostic Laboratories, LLC

Firm/Company

2439 Kuser Road

Address

Hamilton, NJ 08690

City/State and Zip Code

skatzenstein@mdlab.com

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

For further information concerning this matter, please call:

Seth Katzenstein

,609

528-6175

Name of Contact 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 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	Liability Company, most include Elimic	ed Liability Company," "L.L.C.," or "LLC."}		
name unavailable, enter alternate name ado	pted for the purpose of transacting business in Fk	orida. The alternate name must include "Limited Liab	ility Company," "L.L.C," or "LLC."	
New Jersey		3 22-6510467		
	ign limited hability company is organized)		er, if applicable)	
(L) (\$	onte first transacted business in Florida, if prior to ee sections 605.0904 & 605.0905, F.S. to determ	registration.) ine penalty liability)		
2439 Kuser Road		6 2439 Kuser Road		
(Street Address of Principal	Office)		(Mailing Address)	
Hamilton, NJ 08690		Hamilton, NJ 08690		
.				
Name and street address of E	larida ragistarad aganti (D.O. Day	NOT againtable)	<u> </u>	
Name and street address of r	lorida registered agent: (P.O. Box	(NOT acceptable)		
Name: Jok	n Sniffin		ا	
<u></u>	20 D	C 050	TAN - B	
Office Address: 542	29 Beaumont Center Blvd,	Suite 850		
Tar	mpa	, Florida 33634	1	
	(City)	, Florida Cap code		
		si-matura)		
	(Registered agent's	-		
The name, title or capacity a	nd address of the person(s) who h	as/have authority to manage is/are:	Normal address	
	nd address of the person(s) who h Name and Address:	-	Name and Address:	
The name, title or capacity a	nd address of the person(s) who h	as/have authority to manage is/are:	Name and Address:	
The name, title or capacity a Title or Capacity:	nd address of the person(s) who h Name and Address: Eli Mordechai, Ph.D. 2439 Kuser Road	as/have authority to manage is/are:	Name and Address:	
The name, title or capacity a Title or Capacity:	nd address of the person(s) who h Name and Address: Eli Mordechai, Ph.D.	as/have authority to manage is/are:	Name and Address:	
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The name, title or capacity a Title or Capacity: Managing Member	nd address of the person(s) who h Name and Address: Eli Mordechai, Ph.D. 2439 Kuser Road	as/have authority to manage is/are:	Name and Address:	
The name, title or capacity a Title or Capacity: Managing Member Jse attachments if necessary)	nd address of the person(s) who hame and Address: Eli Mordechai, Ph.D. 2439 Kuser Road Hamilton, NJ 08890	as/have authority to manage is/are: Title or Capacity:		
The name, title or capacity a Title or Capacity: Managing Member Jse attachments if necessary) Attached is a certificate of ex	nd address of the person(s) who h Name and Address: Eli Mordechai, Ph.D. 2439 Kuser Road Hamilton, NJ 08890	as/have authority to manage is/are: Title or Capacity: duly authenticated by the official ha	ving custody of records in	
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Typed or printed name of signee

Seth J. Katzenstein, ESq.

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

MEDICAL DIAGNOSTIC LABORATORIES L.L.C.

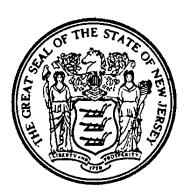
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I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on April 16, 1997.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

DR ELI MORDECHAI 2439 KUSER ROAD HAMLTON, NJ 08690-3303 TALLAHASSELT 43



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 21st day of April, 2017

ASSO "Trudden

Ford M. Scudder Acting State Treasurer

Certificate Number: 6079216301

Verify this certificate online at

 $https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp$