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Account#: I20000000088

Date: June 28, 2017	Acceptant, the constraint
Name: Marisa Kugelmann	
Reference #: <b>D303845</b>	
Entity Name: EUROFINS VRL L	OS ANGELES, LLC
✓ Articles of Incorporation/Authoriz	ation to Transact Business
Amendment	
Change of Agent	
Reinstatement	
Conversion	
Merger	
☐ Dissolution/Withdrawal	· · · · · · · · · · · · · · · · · · ·
☐ Fictitous Name	SECR.
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	SEE, FE
Authorized Amount: \$125.00 Signature: \$\forall \text{\$1}	FEGREDA 13

@CORPORATE HQ

COGENCY GLOBAL INC. 10 E 40<sup>th</sup> ST, 10 <sup>th</sup> FL NY, NY 10016 800.221.0102 -1.212.947.7200 **©**EUROPEAN HQ

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Account#: 120000000088

Date: June 28, 2017	Account#. 120000000066
Name: Marisa Kugelmann	
Reference #: <b>D303845</b>	
Entity Name: EUROFINS VRL	LOS ANGELES, LLC
✓ Articles of Incorporation/Authoria	zation to Transact Business
Amendment	
Change of Agent	
Reinstatement	
Conversion	
Merger	
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Authorized Amount:	
Signature:	

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## **COVER LETTER**

то:	Registration Section Division of Corporation	ons					
SUBJ	ECT:	Eurofins V	RL Los Angeles, LL	С			
	<del></del>	Name o	f Limited Liability	Company		_	
The er Existe	nclosed "Application by Fo nce, and check are submitt	oreign Limited Liability Con ted to register the above refe	mpany for Authoriz erenced foreign lim	ation to Ti ited liabili	ransact Business in Flori ty company to transact b	ida," Certi ousiness in	ficate of Florida
Please	return all correspondence	concerning this matter to th	e following:				
			Ryan Ford				
		1	Name of Person				
			NSC US Legal				
		1	Firm/Company				
		2429	5 New Holland Pike				
			Address				
			ncaster PA 17601	·· <del></del>		<del></del>	
		City/	State and Zip Code			ALCR.	
			al@eurofinsus.com			盖口	量工
For fur	ther information concerning	E-mail address: (to be using this matter, please call:	ed for future annua	l report no	tification)	ARY OF S	N 28 M 6
	R	yan Ford	at (717	_)	5567941	25	ٷ
	Name	of Contact Person	Area Code	Day	ytime Telephone Numbe	er Brei	क्
	MAILING ADDRESS Division of Corporation			Division	T ADDRESS: of Corporations	•	
Registration Section P.O. Box 6327				Clifton E	tion Section		
	Taliahassee, FL 32314			2661 Ex	ecutive Center Circle see, FL 32301		
Enclose	ed is a check for the follow						
	\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filis Certified Copy	ıg Fee &	\$160.00 Filing Fed of Status & Certified		ile

## 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; Eurofins VRL Los Angeles, LLC (Name of Foreign 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. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") Delaware 81-4336058 (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) January 1, 2017 (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) Eurofins VRL Los Angeles, LLC 2100 West Third Street, Suite 301, Los Angeles, CA 90057 (Street Address of Principal Office) NSC US Legal 2425 New Holland Pike Lancaster PA 17601 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) COGENCY GLOBAL INC. Name: 115 North Calhoun Street, Suite 4 Office Address: Tallahassee , Florida (City) Registered agent's acceptance: 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 application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith 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. 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Matthew G. Urbanek - Treasurer - 1001 NW Technology Drive, Lee's Summit, MO 64086 Julie Kliegi - Board member - 1001 NW Technology Drive, Lee's Summit, MO 64086 Dan Dickinson - Secretary - 2200 Rittenhouse Street, Suite 174, Des Moines, IA 50321 9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) Signature of an authorized person This document is executed in accordance with section 605,0203 (1) (b), Florida Statutes. 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.817.155, F.S.

Matthew G, Urbanek
Typed or printed name of signee

Page 1

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "EUROFINS VRL LOS ANGELES, 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 TWENTY-EIGHTH DAY OF JUNE, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EUROFINS VRL LOS ANGELES, LLC" WAS FORMED ON THE SECOND DAY OF NOVEMBER, A.D. 2016.

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

FILED

17. JUN 28 M 6 13

SECRETARY OF STATE STATE AND ANASSEE, FLORIDA

Authentication: 202794274

Date: 06-28-17

6201074 8300 SR# 20174988095