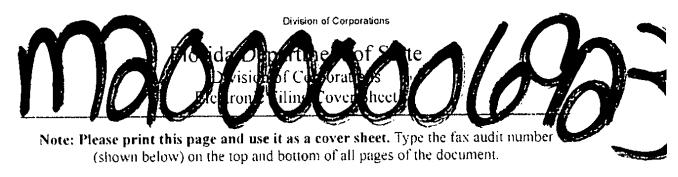
8/10/2020



(((H20000271918 3)))



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Foreign Limited Liability Company Rapid Reliable Testing, LLC

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Page 1

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

DELAWARE, DO HEREBY CERTIFY "RAPID RELIABLE TESTING, 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 THIRTIETH DAY OF JUNE, A.D. 2020.

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

Authentication: 203199292

Date: 06-30-20

Fax audit number H20000271918 3

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

IN COMPLIANCE WITH SECTION 605 UND, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDAY

Liability Company," "L L C.	ternate name adopted for the purpose of transacti	us business in Florida. The alterna	te name mu	st include "	Limited
	" or "LLC.")				
2. Delaware		5-0856301			
(Jurisdiction under the law company is organized)	of which torough limited hability	(FEI munber, if appli	cable)		
407/01/2020	(Date first transacted business in Florida	Winter to regulation			
	(See sections 605.0904 & 605.0905, F.S. to	determine penalty liability)			
5. 35 W 35th St, 6th	h Floor, New York, New York 1000)1			
			.~		
	(Street Address of Peticipal Offi			2ŪŽĐ	
6. 35 W 35th St, 6th	h Floor, New York, New York 1000)		;;- <u>-</u>	·~
			5 .	200	•
	(Mailing Address)		- ; . ;	43	i
7. Name and street address	$_{55}$ of Florida tegistered agent: (P.O. Box $\overline{ m NC}$	OT acceptable)	÷.,	****	1::
Name	Business Filings Incorporated			[편 .*	:· ·
	1200 South Pine Island Road			4 _[1]	
Office Address:			•	نـ	
	Plantation (City)	Florida 33324 (Zip cod	ie)		
Registered agent's accep	tance:				
designated in this applica to complywith the provision	egistered agent and to accept service of proci- tion, I hereby accept the appointment as reg- ous of all statutes relative to the proper and my pasition as registered agent.	ristered agent and agree to act complete performance of my (in this cap Inties, and	acity. I fi I am fam	irther agree Har with and
	(Registered agent's	imanie) Mark Williams, A.V	7.P., Busin	ess Filing	s Incorporate
		ve authority to manage is/are:			
S. The name, title or capa	icity and address of the person(s) who has:ha				
	acity and address of the person(s) who has/ha Holdings LLC, 35 W 35th St, 6th I		ork 1000)1	
	Holdings LLC, 35 W 35th St, 6th F		ork 1000	<u> </u>	
			ork 1000	<u> </u>	
			ork 1000	<u> </u>	
Member: Ambulnz	Holdings LLC, 35 W 35th St, 6th F of existence, no more than 90 days old duly of which it is regarded. (If the certificate is	loor, New York, New Y	ving custo	dy of reco	rds in the under oath
Member: Ambulnz 9. Attached is a certificate jurisdiction under the law	Holdings LLC, 35 W 35th St, 6th F of existence, no more than 90 days old duly of which it is regarded. (If the certificate is	authenricated by the official ha	ving custo	dy of reco	ids in the under oath

This document is executed in accordance with section 605.0263 (1) (b). Florida Statutes. I am awate that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in 5.817.155. F.S.

Stan Vashovsky, President of Ambulnz Inc, Member of Ambulnz Holdings LLC, Member Typed or printed name of signee