

M24000009180

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

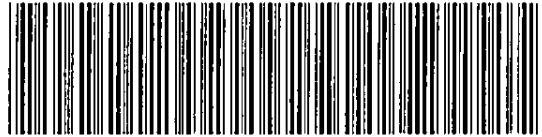
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W24-102703

Office Use Only



900431827749

APPROVED  
AND  
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2024 JUL 15 PM 1:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

2024 JUL 15 PM 12:05

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUL 18 2024  
K. Brumley



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 15, 2024

COGENCY GLOBAL

*Please keep  
original  
file date*

SUBJECT: GOLD STANDARD DIAGNOSTICS HORSHAM, LLC  
Ref. Number: W24000102703

We have received your document for GOLD STANDARD DIAGNOSTICS HORSHAM, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.," also are no longer acceptable.

The document number of the name conflict is F19000003163.

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.

KYLE D BRUMBLEY  
Regulatory Specialist II Supervisor

Letter Number: 724A00015359

RECEIVED

2024 JUL 17 PM 12:09  
SECTION OF THE  
DIVISION OF CORPORATIONS  
FLORIDA



115 N CALHOUN ST., STE. 4  
TALLAHASSEE, FL 32301  
P: 866.625.0838  
F: 866.625.0839  
COGENCYGLOBAL.COM

Account#: I20000000088  
For any issues please contact  
Cheyanne Davis  
(850) 202-1882

Date: 07/17/2024

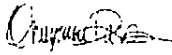
Name: Cheyenne Davis

Reference #: 2438113

Entity Name: GOLD STANDARD DIAGNOSTICS HORSHAM, LLC

- ☒ Articles of Incorporation/Authorization to Transact Business
- ☐ Amendment
- ☐ Change of Agent
- ☐ Reinstatement
- ☐ Conversion
- ☐ Merger
- ☐ Dissolution/Withdrawal
- ☐ Fictitious Name
- ☐ Other \_\_\_\_\_

Authorized Amount: \$125.00

Signature: 

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: GOLD STANDARD DIAGNOSTICS HORSHAM, 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:

**Richard Quashne**

Name of Person

**Eurofins US National Service Center, Inc.**

Firm/Company

**795 Horsham Road**

Address

**Horsham, PA 19044**

City/State and Zip Code

**complianceteam@agencyglobal.com**

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

For further information concerning this matter, please call:

\_\_\_\_\_  
Name of Contact Person at (\_\_\_\_\_) \_\_\_\_\_  
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:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$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:

1. GOLD STANDARD DIAGNOSTICS HORSHAM, 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.")

2. Pennsylvania 3. 82-0630162  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 795 Horsham Road 6. 795 Horsham Road  
(Street Address of Principal Office) (Mailing Address)  
Horsham, PA 19044 Horsham, PA 19044

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Cogency Global Inc.

Office Address: 115 North Calhoun St. Suite 4

Tallahassee, Florida 32301  
(City) (Zip code)

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 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.*

/s/ Navian Brown Asst. Secretary  
(Registered agent's signature)

APPROVED  
AND  
FILED  
2024 JUL 15 PM 1:32  
CLERK OF DISTRICT COURT  
CLERK OF DISTRICT COURT

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:                      Name and Address:  
☒ Manager      Name: Richard Quashne  
☐ Member              Address: 124 Railroad Drive  
☐ Authorized              Warminster, PA 18974  
Person  
☐ Other \_\_\_\_\_ | Other \_\_\_\_\_

Title or Capacity:                      Name and Address:  
☐ Manager      Name: Dan Dickinson  
☐ Member              Address: 2200 Rittenhouse St  
☒ Authorized              Suite A  
Person                      Des Moines, IA 50321  
☐ Other \_\_\_\_\_ | Other \_\_\_\_\_

☐ Manager      Name: Kristin Eck  
☐ Member              Address: \_\_\_\_\_  
☒ Authorized              343 West Main Street  
Person                      Leola, PA 17540  
☐ Other \_\_\_\_\_ | Other \_\_\_\_\_

☐ Manager      Name: Justin Dudas  
☐ Member              Address: 343 West Main Street  
☒ Authorized              Leola, PA 17540  
Person  
☐ Other \_\_\_\_\_ | Other \_\_\_\_\_

☒ Manager      Name: Timothy Oostdyk  
☐ Member              Address: 2425 New Holland Pike  
☐ Authorized              Lancaster, PA 17603  
Person  
☐ Other \_\_\_\_\_ | Other \_\_\_\_\_

☐ Manager      Name: \_\_\_\_\_  
☐ Member              Address: \_\_\_\_\_  
☐ Authorized              \_\_\_\_\_  
Person  
☐ Other \_\_\_\_\_ | Other \_\_\_\_\_

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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)

10. 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.

  
\_\_\_\_\_  
Signature of an authorized person

Justin Dudas

\_\_\_\_\_  
Typed or printed name of signer

**Pennsylvania Department of State**  
Bureau of Corporations and Charitable Organizations  
PO Box 8722 | Harrisburg, PA 17105-8722  
T: 717-787-1057  
[dos.pa.gov/BusinessCharities](http://dos.pa.gov/BusinessCharities)

**Regarding:** Gold Standard Diagnostics Horsham, LLC  
**Request Type:** Subsistence Certificate **Issuance Date:** July 12, 2024  
**Request No.:** 039270430 **File No.:** 0002864328  
**Receipt No.:** 001131887  
**Filing Type:** Domestic Limited Liability Company  
**Filing Subtype:** Limited Liability Company  
**Initial Filing Date:** March 03, 1999  
**Status:** Active

**TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:**

I DO HEREBY CERTIFY THAT

Gold Standard Diagnostics Horsham, LLC

is currently subsisting on the records of the Department of State as of the issuance date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have  
hereunto set my hand and caused the seal  
of my office to be affixed, the day and year  
above written

**Albert Schmidt**  
Secretary of the Commonwealth

Verify this certificate online at [www.file.dos.pa.gov](http://www.file.dos.pa.gov)