

**2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M09000004413

**Entity Name:** ACCESS GENETICS, LLC

**Current Principal Place of Business:**

7400 FLYING CLOUD DRIVE  
SUITE 150  
EDEN PRAIRIE, MN 55344

**Current Mailing Address:**

7400 FLYING CLOUD DRIVE  
SUITE 150  
EDEN PRAIRIE, MN 55344 US

**FEI Number:** 41-2007276

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

INCorp SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title MGRM  
Name MCGLENNEN, RONALD CHARLES  
Address 7400 FLYING CLOUD DRIVE  
SUITE 150  
City-State-Zip: EDEN PRAIRIE MN 55344

Title CEO  
Name HOEDEMAN, GEORGE  
Address 7400 FLYING CLOUD DRIVE  
SUITE 150  
City-State-Zip: EDEN PRAIRIE MN 55344

Title CFO  
Name HOEDEMAN, PAUL  
Address 7400 FLYING CLOUD DRIVE  
SUITE 150  
City-State-Zip: EDEN PRAIRIE MN 55344

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** RONALD CHARLES MCGLENNEN

**MANAGING MEMBER**

**03/11/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date