

2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M18000003557

Entity Name: CYTOCHECK LABORATORY, LLC

Current Principal Place of Business:

1201 CORPORATE DR.
PARSONS, KS 67357

Current Mailing Address:

9705 LENEXA DRIVE
LENEXA, KS 66215 US

FEI Number: 35-2611308

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COGENCY GLOBAL INC.
115 NORTH CALHOUN ST.
SUITE 4
TALLAHASSEE, FL 32301 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 MBR
Name MAWD PATHOLOGY PARTNERS, P.A.
Address 2750 CLAY EDWARDS DR. #420
City-State-Zip: NORTH KANSAS CITY MO 64116

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: JASON DANTIC

GENERAL MANAGER

02/13/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date