

State of Florida



Department of State

I certify from the records of this office that PATHOLOGY LAB MANAGEMENT LLC, is a limited liability company organized under the laws of the State of Florida, filed on February 26, 2016.

The document number of this company is L16000040097.

I further certify that said company has paid all fees due this office through December 31, 2016, and its status is active.

Authentication Code: 316A00004132-022916-L16000040097-1/1

Given under my hand and the
Great Seal of the State of Florida,
at Tallahassee, the Capital, this the
Twenty-ninth day of February, 2016



Ken Deizner
Ken Deizner
Secretary of State



February 29, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

PATHOLOGY LAB MANAGEMENT LLC
1525 NW 167 ST, STE 150
MIAMI GARDENS, FL 33169US

The Articles of Organization for PATHOLOGY LAB MANAGEMENT LLC were filed on February 26, 2016, and assigned document number L16000040097. Please refer to this number whenever corresponding with this office.

The certification you requested is enclosed. To be official, the certification for a certified copy must be attached to the original document number that was electronically submitted and filed under FAX audit number H16000050290.

To maintain "active" status with the Division of Corporations, an annual report must be filed yearly between January 1st and May 1st beginning in the year following the file date or effective date indicated above. If the annual report is not filed by May 1st, a \$400 late fee will be added. It is your responsibility to remember to file your annual report in a timely manner.

A Federal Employer Identification Number (FEI/EIN) will be required when this report is filed. Apply today with the IRS online at:

<https://sa.www4.irs.gov/modiein/individual/index.jsp>.

Please be aware if the limited liability company address changes, it is the responsibility of the limited liability to notify this office.

Should you have any questions regarding this matter, please contact this office at the address given below.

Teresa Brown
Regulatory Specialist II
New Filing Section
Division of Corporations

Letter Number: 316A00004132

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: *(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")*

PATHOLOGY LAB MANAGEMENT LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

1525 NW 167 ST
SUITE 150
MIAMI GARDENS FL 33169

ARTICLE III - Registered Agent, Registered Office:

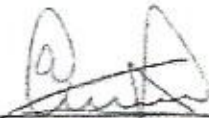
The name and the Florida street address of the registered agent are: *(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)*

Hugo Romeo
1525 NW 167 ST SUITE 150
MIAMI GARDENS FL 33169

ARTICLE IV-

The name and title of each person authorized to manage and control the Limited Liability Company:

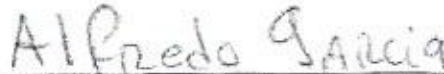
Hugo Romeo (AMBR)
Alfredo C. Garcia (AMBR)

Required Signatures:


Signature of a member or an authorized representative of a member.

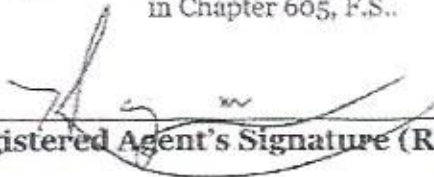
In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

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.



Typed or printed name of signee

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..



Registered Agent's Signature (REQUIRED)