Filing Fee: \$150.00



RI088 - 08/20/2013 C T Filing Manager Online

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Division of Business Services
148 W. River Street
Providence, Rhode Island 02904-2615

LIMITED LIABILITY COMPANY

SECRETARY OF STATE CORPORATIONS DIV

APPLICATION FOR REGISTRATION

Pursuant to the provisions of Section 7-16-49 of the General Laws of Rhode Island, I956, as amended, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

1.	The name of the limited liability company is:				
	PerkinElmer Medical Imaging, LLC				
	This company has been duly organized in its state of formation as a	a low-profit limited liability company	(Check box if applicable)		
2.	The name, if different, under which it proposes to register and transact business in Rhode Island is:				
3.	The limited liability company is organized under the laws of	Delaware			
4.	The date of its organization is 12/22/2015				
5.	i. The period of duration of the limited liability company is (if perpetual, so state) Perpetual				
6.	The address of the limited liability company's resident agent in Rhode Island is:				
	450 Veterans Memorial Parkway, Suite 7A	East Providence	, RI <u>02914</u>		
	(Street Address, not P.O. Box)	(City/Town)	(Zip Code)		
	and the name of the resident agent at such address is \underline{CT}	Corporation System (Name of Ag	ent)		
7.	The secretary of state is appointed the agent of the foreign limited liability company for service of process if at an time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.				
8.	The address of any office required to be maintained in the state or other jurisdiction under the laws of which the limited liability company is organized is:				
	940 Winter Street, Waltham, Massachusetts 02451-1457				
9.	The mailing address for the limited liability company is:				
	940 Winter Street, ATTN: J. Pearl, Waltham, MA 02451-1457				
	FILED				
	rm No. 450 vised: 07/12	FEB 1 0 2016	-		

10.	Management of the Limited Liability Company (check one only):			
A.	The limited liability company is to No. 11 – DO <u>NOT</u> LIST ANY NA	be managed by its members. (If you have checked this box, go to item MES IN SECTION B.)		
	<u>or</u>			
В.	The limited liability company is company has managers at the address of each manager.)	at the time of the filing of these Articles of Organization, state the name and		
	<u>Manager</u>	Address		
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a	 This application is accompanied by a certificate of good standing duly authenticated by the secretary of state or othe authorized officer of the jurisdiction under which the foreign limited liability company was organized. The date this Application for Registration is to become effective, if later than the date of filing, is: 			
	(not prior to, nor more	than 30 days after, the filing of this Application for Registration)		
		Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments and that all statements contained herein are true and correct.		
Date:	February 9, 2016	PerkinElmer Medical Imaging, LLC Print Exact Name of Limited Liability Company Making Application		
		By Signature of Authorized Person		
		John I. Healy Secretary & VP of PerkinElmer Medical Holdings, Inc.		

<u>Delaware</u>

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The First State

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

DELAWARE, DO HEREBY CERTIFY "PERKINELMER MEDICAL IMAGING, 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 NINTH DAY OF FEBRUARY, A.D. 2016.

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

SECRETARY OF STATE CORPORATIONS DIV



Authentication: 201803625

Date: 02-09-16

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