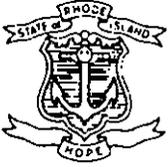


Filing Fee: \$150.00

RECEIVED
SECRETARY OF STATE
CORPORATION DIVISION

ID Number: 131442



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

APR 16 2 25 PM '03

RECEIVED
SECRETARY OF STATE
CORPORATION DIVISION
APR 17 10 40 AM '03

LIMITED LIABILITY COMPANY

APPLICATION FOR REGISTRATION
(To Be Filed In Duplicate)

Pursuant to the provisions of Section 7-16-49 of the General Laws, 1956, 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:

QUEST DIAGNOSTICS LLC

2. The name, if different, under which it proposes to register and transact business in Rhode Island is:

N/A

3. The limited liability company is organized under the laws of MASSACHUSETTS

4. The date of its organization is JANUARY 8, 2002

5. 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:

222 Jefferson Blvd., Suite 200 Warwick RI 02888
(Street Address, not P O. Box) (City/Town) (Zip Code)

and the name of the resident agent at such address is National Registered Agents, Inc.

(Name of Agent)

7. The secretary of state is appointed the agent of the foreign limited liability company for service of process if at any 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:

Clinical diagnostic laboratory

9. The mailing address for the limited liability company is:

415 Massachusetts Avenue, Cambridge, MA 02139

FILED

APR 18 2003

By AMF
316 703

10. The limited liability company is to be managed by:

(Check one box only)

its members *or* by one (1) or more managers

11. If the limited liability company has managers at the time of filing this application, please list the name and address of each manager:

Manager

Address

<u>Manager</u>	<u>Address</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

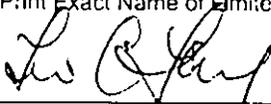
12. This application is accompanied by a certificate of good standing duly authenticated by the secretary of state or other authorized officer of the jurisdiction under which the foreign limited liability company was organized.

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: April 15, 2003

QUEST DIAGNOSTICS LLC

Print Exact Name of Limited Liability Company Making Application

By 
Signature of authorized person

200301669

035
077

2003
ANNUAL REPORT
OF
QUEST DIAGNOSTICS LLC
A Massachusetts Limited Liability Company

FILED
FEB 07 2003
SECRETARY OF THE COMMONWEALTH
CORPORATIONS DIVISION

To the Secretary of State
Commonwealth of Massachusetts

The undersigned, an authorized person of **Quest Diagnostics LLC**, a domestic limited liability company, being duly sworn, states that:

1. The name of the domestic limited liability company (hereinafter referred to as the "domestic limited liability company") is

Quest Diagnostics LLC

2. The general character of the business to be conducted by the domestic limited liability company in the Commonwealth of Massachusetts is clinical laboratory testing.

3. The address of the principal office of the domestic limited liability company in the Commonwealth is: 415 Cambridge Avenue, Cambridge, Massachusetts 02139.

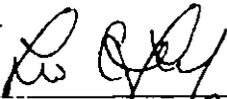
5. If the limited liability company is managed by managers, the name, business address, and residence address of each manager of the domestic limited liability company are as follows:

<u>NAME</u>	<u>BUSINESS ADDRESS</u>	<u>RESIDENCE ADDRESS</u>
Surya N. Mohapatra	One Malcolm Avenue Teterboro, NJ 07608	202 Chestnut Ridge Road Saddle River, NJ 07458
Robert A. Hagemann	One Malcolm Avenue Teterboro, NJ 07608	16 Rochambeau Road Pompton Plains, NJ 07444

6. The name and business address of the resident agent of the limited liability company are CT Corporation System, 101 Federal Street, Boston, Massachusetts 02110.

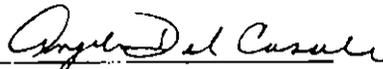
7. The latest date on which the limited liability company is to dissolve is (no dissolution date).

Executed on this 6th day of February, 2003.



Leo C. Farrenkopf, Jr., Secretary (Authorized Person)

Sworn to before me this 6th day of February, 2003.



Notary Public
State of New Jersey
County of Bergen

ANGELA DEL CASALE
Notary Public of New Jersey
My Commission Expires Sept. 20, 2008

