

**Commonwealth of Kentucky**  
**Alison Lundergan Grimes, Secretary of State**

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Alison Lundergan Grimes  
Secretary of State  
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Alison Lundergan Grimes  
Secretary of State  
P. O. Box 718  
Frankfort, KY 40602-0718  
(502) 564-3490  
<http://www.sos.ky.gov>

**Certificate of Authority**  
**Foreign Business Entity**

**FBE**

Pursuant to the provisions of KRS Chapter 14A and KRS Chapter 271B the undersigned hereby applies for authority to transact business in Kentucky on behalf of the entity named below and, for that purpose, submits the following statements:

1. The entity is a **profit** corporation.
2. The name of the entity is **Sanguis Diagnostics Corp..**
3. The name of the entity to be used in Kentucky is **Sanguis Diagnostics Corp..**
4. The state or country under whose law the entity is organized is **Delaware.**
5. The date of organization is **2/8/2019.**
6. The mailing address of the entity's principal office is **243 Idle Hour Dr, Lexington, KY 40502.**
7. The street address of the entity's registered office in Kentucky is **243 Idle Hour Dr, Lexington, KY 40502** and the name of the registered agent in that office is **Patrick Lawless.**
8. The names and business addresses of the entity's representatives:  

Patrick Lawless                      243 Idle Hour Dr, Lexington, KY 40502  
Vernon Dryden                        3792 Duellant Rd, Loxahatchee, FL 33470
9. I certify that, as of the date of filing of this application, the above-named entity validly exists under the laws of the jurisdiction of its formation.
10. This application will be effective on filing.

Signature of Authorized Representative:  
**Patrick Lawless**

I, **Patrick Lawless**, consent to serve as the Registered Agent on behalf of the business entity.

Signature of Registered Agent or individual signing on behalf of the company serving as Registered Agent:

Patrick Lawless