

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

P101

1064277.09  
Alison Lundergan Grimes  
Secretary of State  
Received and Filed  
7/8/2019 4:00:12 PM  
Fee receipt: \$90.00

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 **American Diagnostics Inc.**
3. The name of the entity to be used in Kentucky is **American Diagnostics Inc.**
4. The state or country under whose law the entity is organized is **Tennessee**.
5. The date of organization is **7/1/1986**.
6. The mailing address of the entity's principal office is **8161 Highway 100 Pmb 170, Nashville, TN 37221**.
7. The street address of the entity's registered office in Kentucky is **324 Grape Crk, Salyersville, KY 41465** and the name of the registered agent in that office is **Angela Howard**.
8. The names and business addresses of the entity's representatives:  
  
David Driggs                      8161 Highway 100 Pmb 170, Nashville, TN 37221  
  
Cindy Brainerd                  8161 Highway 100 Pmb 170, Nashville, 372214213
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:  
**Cindy Brainerd**

I, **Angela Howard**, 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:

Angela Howard