

**F1100000427A**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : C T CORPORATION SYSTEM  
Account Number : PCA000000023  
Phone : (850)222-1092  
Fax Number : (850)878-5368

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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FOREIGN PROFIT/NONPROFIT CORPORATION**  
**Ortho-Clinical Diagnostics, Inc.**

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$70.00

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**\*RE-SUBMIT\***

Please retain original filing date of submission 10/12

10/25

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Ortho-Clinical Diagnostics, Inc.  
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

James J. Jackson  
Name of Person

---

Ortho-Clinical Diagnostics, Inc.  
Firm/Company

---

c/o Johnson & Johnson, One Johnson & Johnson Plaza, WH3108,  
Address

---

New Brunswick, New Jersey 08933  
City/State and Zip code

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jjackso4@its.jnj.com  
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

James J. Jackson at ( 732 ) 524 3347  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**  
New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Ortho-Clinical Diagnostics, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. New York 3. 22-3329332
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/17/1994 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Upon filing.
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1001 U.S. Route 202, Raritan New Jersey 08869
(Principal office address)

(Current mailing address)

8. Development, Manufacture and Sale of Diagnostic Products.
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

C T Corporation System

By: Connie Bryan
(Registered agent's signature) Assistant Secretary

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: See Attached Schedule A.

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: \_\_\_\_\_

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

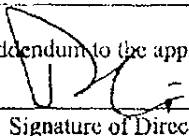
Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. \_\_\_\_\_



Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that 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.

14. Douglas Chia, Assistant Secretary

(Typed or printed name and capacity of person signing application)

**Schedule A****Ortho-Clinical Diagnostics, Inc.****Officers**

<b><u>Officers</u></b>	<b><u>Job Title</u></b>
McMahon, Robert W	Chief Financial Officer
Fagan, Stephanie	Vice President, Worldwide Communications
HILLBERG, HOLLY	Vice President, Research & Development
Kalin, Katherine C	Vice President, Franchise Strategic Management
LOPEZ, BEATRIZ	Vice President, Worldwide Human Resources
McMahon, Robert W	Vice President, Worldwide Finance
SMITH, ROBERT J	Vice President, Worldwide Operations
Brusdeilins, Martin	Vice President, Research & Development Worldwide
Montandon, Carol M	Vice President, Worldwide Quality, Regulatory Affairs and Compliance.
Samoszuk, Michael K	Vice President and Chief Medical Officer
Zezzo, Anthony	Vice President & General Manager, Americas
McMahon, Robert W	Treasurer
Nixon, Randall L	Secretary
Burns, Todd J	Assistant Secretary
Chia, Douglas K	Assistant Secretary
CHUNG, DANIEL	Assistant Secretary
Coletti, Paul A	Assistant Secretary
Godard, Randy E	Assistant Secretary
Rickles, Laurence S	Assistant Secretary
Rosenberg, Steven M	Assistant Secretary
Sharkey, John F	Assistant Secretary
Stark, Michael	Assistant Secretary
Volyn, Todd F	Assistant Secretary
Zocca, Robert L	Assistant Secretary

**Directors**

Kalin, Katherine C	Director
McMahon, Robert W	Director
Nixon, Randall L	Director

**State of New York  
Department of State } ss:**

I hereby certify, that the Certificate of Incorporation of ORTHO-CLINICAL DIAGNOSTICS, INC. was filed on 10/17/1994, under the name of CLINICAL DIAGNOSTIC SYSTEMS, INC., with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

A Certificate of Amendment CLINICAL DIAGNOSTIC SYSTEMS, INC., changing its name to JOHNSON & JOHNSON CLINICAL DIAGNOSTICS, INC., was filed 05/25/1995.

A Certificate of Amendment JOHNSON & JOHNSON CLINICAL DIAGNOSTICS, INC., changing its name to ORTHO-CLINICAL DIAGNOSTICS, INC., was filed 12/08/1997.



\*\*\*

*Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 29th day of September  
two thousand and eleven.*

A handwritten signature in cursive script, appearing to read "Daniel Shapiro".

Daniel Shapiro  
First Deputy Secretary of State

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