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June 30, 2015

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Dear Sir or Madam:

Enclosed please find the completed Application by Foreign Corporation for Authorization to Transact Business in Florida for Amring Pharmaceuticals Inc. Kindly process the application along with the following enclosed:

- A check for \$70.00 made payable to: "Florida Department of State."
- Attachment A: Delaware Certificate of Existence.
- Attachment B: Corporate Officer and Director Information.

Should you need further information, please feel free to contact me.

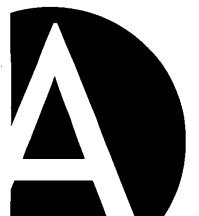
Very truly yours,

Daniel Carbery

President

Amring Pharmaceuticals Inc.

**Enclosures** 



### **COVER LETTER**

<b>ΓO:</b> New Filing Section Division of Corporations			
SUBJECT: Amring Pharmaceut	ticals	s Inc.	
		- must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporati 'Certificate of Existence," or "Certificate of Goo above referenced foreign corporation to transact	od Stan	ding" and check are sub	
Please return all correspondence concerning this	matter	to the following:	
Daniel Carbery			
Na	me of I	Person	
Amring Pharmaceuticals Inc			
Fin	m/Com	pany	
1235 Westlakes Drive, Suite	205	5	
	Addre	SS	
Berwyn, PA 19312			
•		nd Zip code	
danielcarbery@amringpharma.			
E-mail address: (to be	used t	or future annual report r	notification)
For further information concerning this matter, p	lease c	all:	
Daniel Carbery	73	_ <sub>)</sub> 452-7207	
Name of Person	Area (	Code & Daytime Telepho	one Number
		,	
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING A New Filing Se Division of Co P.O. Box 6327 Tallahassee, F	ction orporations 7
Enclosed is a check for the following amount:			
\$70.00 Filing Fee \$\opin\$ \$78.75 Filing Fee \$\&\opin\$ Certificate of Statu		\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, 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.

	Corp," "Inc," "Co," or "Corp.")	
N/A		
	· · · · · · · · · · · · · · · · · · ·	e adopted for the purpose of transacting business in Florida)
Delaware	3	47-1604786 (FEI number, if applicable)
-	,,,,,,,,,,	( as trained, to appropriate
11/21/20	<u>11                                   </u>	Perpetual  (Duration: Year corp. will cease to exist or "perpetual")
N/A-	not applicable; no business	in Florida, if prior to registration)
	(Date first transacted business	in Florida, if prior to registration)
1225 Mai		1502, F.S., to determine penalty liability)
1233 446	stlakes Drive, Suite 205, E	
1225 Mac	· · · · · ·	•
1233 4468	tlakes Drive, Suite 205, Ber	بين منتب المستقد المست
	(Current mailing ad	idress)
Name and atro	et address of Florida registered agent: (P.	IO Pay NOT acceptable)
INAMINE ARE SHE		.O. Box NOT acceptable)
		· · · · · · · · · · · · · · · · · · ·
	Corporation Service Compa	ny Cop
	Corporation Service Compa	Eng P
	1201 Hays Street	PM 2: 52 OF STAI E. FLORI
	Corporation Service Compa 1201 Hays Street Tallahassee (City)	.O. Box NOT acceptable)  SSEC. Florida 32301  Florida 32301

10. 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. See Attachment A

(Registered agent's signature) Assistant Secretary

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: See Attachment B Vice Chairman: Director: \_ **B. OFFICERS** President: See Attachment B Address: \_\_ Vice President: Address: Secretary: \_ Address: \_ Treasurer: NOTE: If necessary, you may attach an addendmen to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 2 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.

# 13. Daniel Carbery, President

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

### Attachment A

### **Delaware Certificate of Existence**

# Delaware

PAGE 1

# The First State

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

DELAWARE, DO HEREBY CERTIFY "AMRING PHARMACEUTICALS INC." IS

DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS

IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS

THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIFTH DAY OF

JUNE, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AMRING PHARMACEUTICALS INC." WAS INCORPORATED ON THE TWENTY-FIRST DAY OF NOVEMBER, A.D. 2011.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE

BEEN FILED TO DATE.

Y OF STATE FE FLORIDA

5069027 8300

150972615

Jeffrey W Bullock. Secretary of State

AUTHENTY CATION: 2501773

DATE: 06-25-15

You may verify this certificate online at corp.delaware.gov/authver.shtml

#### **Attachment B**

### **Corporate Officer and Director Information**

Amring Pharmaceuticals Inc. 1235 Westlakes Drive, Suite 205 Berwyn, PA 19312

### **Corporate Officers:**

Daniel Carbery President

Lalit Ahluwalia Treasurer

Stacey Antar Secretary

Richard Anderson

Assistant Treasurer

Lonnie Robinson
Assistant Treasurer

#### **Directors:**

Jean M. Quinot Lalit Ahluwalia Stacey Antar 15 JUL 14 PM 2: 52
SECRETARY OF STATE
TALL AHASSEE FLORID

<sup>\*</sup>All corporate officers and directors may be contacted at the address provided above.