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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

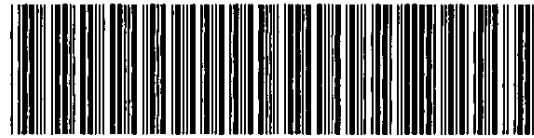
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

JUN 13 2017  
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# Progenics<sup>®</sup>

Pharmaceuticals

May 31, 2017

Florida Department of State  
Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

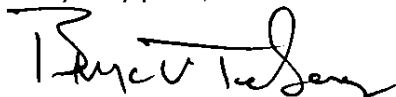
Dear Sir or Madam:

Enclosed please find a completed Application by Foreign Corporation for Authorization to Transact Business in Florida for Progenics 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 Good Standing.
- Attachment B: Corporate Officer and Director Information.

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

Very truly yours,



Bryce Tenbarge  
Vice President, Commercial  
Progenics Pharmaceuticals, Inc.

Enclosures

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Progenics Pharmaceuticals, 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:

Bryce V. Tenbarga

\_\_\_\_\_  
Name of Person

Progenics Pharmaceuticals, Inc.

\_\_\_\_\_  
Firm/Company

One World Trade Center, 47th Floor Suite J

\_\_\_\_\_  
Address

New York, NY 10007

\_\_\_\_\_  
City/State and Zip code

btenbarga@progenics.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bryce V. Tenbarga

646 975-2540  
at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

**STREET/COURIER ADDRESS:**

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

**MAILING ADDRESS:**

Registration 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. Progenics Pharmaceuticals, Inc.  
 (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")  
 N/A  
 (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 13-3379479  
 (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12/01/1986 5. Perpetual  
 (Date of incorporation) (Date of duration, if other than perpetual)

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

7. One World Trade Center, 47th Floor Suite J, New York, NY 10007  
 (Principal office address)  
 Same as above.  
 (Current mailing address, if different)

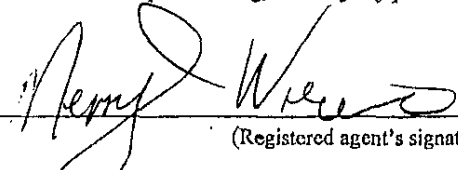
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 TALLAHASSEE, FLORIDA

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

Name: Corporation Service Company  
 Office Address: 1201 Hays Street  
 Tallahassee, Florida 32301  
 (City) (Zip code)

**9. 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.*

  
 (Registered agent's signature)

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

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

**A. DIRECTORS**

Chairman: See Attachment B

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

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

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

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

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

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

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

**B. OFFICERS**

President: See Attachment B

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

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

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

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

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

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

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

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TALLAHASSEE, FLORIDA

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

12. Bryce V. Tenbarger

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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. Bryce V. Tenbarger - Vice President, Commercial

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

Attachment A

Delaware Certificate of Good Standing

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

# Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PROGENICS 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-FOURTH DAY OF MARCH, A.D. 2017.


AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PROGENICS PHARMACEUTICALS, INC." WAS INCORPORATED ON THE FIRST DAY OF DECEMBER, A.D. 1986.



2109273 8300

SR# 20171745062

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State

Authentication: 202258568

Date: 03-24-17

**Attachment B**

**Corporate Officer and Director Information**

Progenics Pharmaceuticals, Inc.  
One World Trade Center, 47th Floor, Suite J  
New York, NY 10007 USA

**Corporate Officers**

Mark R. Baker  
*Chief Executive Officer*

Patrick Fabbio  
*Senior Vice President and Chief Financial Officer*

Jeffrey Summer  
*Senior VP, Strategy & Performance*

Bryce Tenbarge  
*Vice President, Commercial*

Vivien Wong  
*Executive Vice President, Development*

**Directors**

Peter J. Crowley – Chairman of the Board  
Mark R. Baker  
Bradley L. Campbell  
Karen Jean Ferrante  
Michael D. Kishbauch  
David A. Scheinberg  
Nicole S. Williams

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**\*The corporate officers and directors may be contacted at the address provided above.**