

2/27/2020

Division of Corporations

**F2000001072**

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (614)280-3338  
Fax Number : (954)208-0845

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

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

2020 FEB 27 PM 1:39

**FOREIGN PROFIT/NONPROFIT CORPORATION  
ADAPTIVE BIOTECHNOLOGIES CORPORATION**

Certificate of Status	0
Certified Copy	1
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Electronic Filing Menu

Corporate Filing Menu

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FEB 27 2020

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. Adaptive Biotechnologies Corporation
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. Washington 27-0907024
(State or country under the law of which it is incorporated) (FEI number, if applicable)
3. September 8, 2009
(Date of incorporation) (Date of duration, if other than perpetual)
6. (Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 1551 Eastlake Avenue East, Suite 200, Seattle, WA 98102
(Principal office address)
(Current mailing address, if different)

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

Name: C T Corporation System
Office Address: 1209 South Pine Island Road
Plantation, Florida 33324
(City) (Zip code)

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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.

C T Corporation System

By: [Signature] (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.

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

A. DIRECTORS

Chairman: See attached addendum.  
Address:

Vice Chairman:  
Address:

Director:  
Address:

Director:  
Address:

B. OFFICERS

President: See attached addendum.  
Address:

Vice President:  
Address:

Secretary:  
Address:

Treasurer:  
Address:

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

12. Stacy Taylor  
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. Stacy Taylor, SVP, General Counsel  
(Typed or printed name and capacity of person signing application)

Addendum to Application by Foreign Corporation for Authorization to Transact Business in Florida  
(11019)

11.A.

Director Name	Title	Business Address
Kevin Conroy	Director	1551 Eastlake Avenue East, Suite 200 Seattle, Washington, 98102
Eric Dobmeler	Director	1551 Eastlake Avenue East, Suite 200 Seattle, Washington, 98102
David Goel	Director	1551 Eastlake Avenue East, Suite 200 Seattle, Washington, 98102
Michelle Griffin	Director	1551 Eastlake Avenue East, Suite 200 Seattle, Washington, 98102
Robert Hershberg, MD, PhD	Director	1551 Eastlake Avenue East, Suite 200 Seattle, Washington, 98102
Peter Neupert	Director	1551 Eastlake Avenue East, Suite 200 Seattle, Washington, 98102
Michael Pellini, MD	Director	1551 Eastlake Avenue East, Suite 200 Seattle, Washington, 98102
Chad Robins	Chairman	1551 Eastlake Avenue East, Suite 200 Seattle, Washington, 98102
Andris Zoltners	Director	1551 Eastlake Avenue East, Suite 200 Seattle, Washington, 98102

11.B.

Officer Name	Title	Business Address
Chad Robins	Chief Executive Officer & Co-Founder	1551 Eastlake Avenue East, Suite 200 Seattle, Washington, 98102
Harlan Robins, PhD	Chief Scientific Officer	1551 Eastlake Avenue East, Suite 200 Seattle, Washington, 98102
Julie Rubinstein	President	1551 Eastlake Avenue East, Suite 200 Seattle, Washington, 98102
Chad Cohen	Chief Financial Officer	1551 Eastlake Avenue East, Suite 200 Seattle, Washington, 98102
Dance Baldo, MD	Chief Medical Officer	1551 Eastlake Avenue East, Suite 200 Seattle, Washington, 98102
Sean Nolan	Chief Technical Officer	1551 Eastlake Avenue East, Suite 200 Seattle, Washington, 98102
Francis Lo	Chief People Officer	1551 Eastlake Avenue East, Suite 200 Seattle, Washington, 98102
Sharon Benzeno, PhD	EVP, Drug Discovery	1551 Eastlake Avenue East, Suite 200 Seattle, Washington, 98102
Nancy Hill	EVP, Operations	1551 Eastlake Avenue East, Suite 200 Seattle, Washington, 98102
Charles Sang	SVP, Clinical Diagnostics	1551 Eastlake Avenue East, Suite 200 Seattle, Washington, 98102
Stacy Taylor	SVP, General Counsel	1551 Eastlake Avenue East, Suite 200 Seattle, Washington, 98102

UNITED STATES OF AMERICA

The State of Washington



Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE

OF

ADAPTIVE BIOTECHNOLOGIES CORPORATION

I CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 09/08/2009.

I FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Issued Date: 02/27/2020
UBI Number: 602 952 386



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Kim Wyman (signature)

Kim Wyman, Secretary of State

Date Issued: 02/27/2020