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APPROVED FILED

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r. Brumbley

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 741648 8104249

AUTHORIZATION (

COST LIMIT : '\$ 78.75

ORDER DATE: April 1, 2021

ORDER TIME : 11:08 AM

ORDER NO. : 741648-005

CUSTOMER NO: 8104249

FOREIGN FILINGS

NAME: TREELINE BIOSCIENCES, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY ____ PLAIN STAMPED COPY ___ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT# 61594

EXAMINER: ____

COVER LETTER

10:	Registration Se Division of Co				
SUBJ	ECT:	Treeline Bioscience	s. Inc.		
		Name of corp	oration - must	include suffix	
Dear S	Sir or Madam:				
"Certi	ficate of Existen	tion by Foreign Corporates," or "Certificate of Goi gn corporation to transact	od Standing" a	ind check are sub	
Please	return all corres	pondence concerning this	matter to the	following:	
		Sa	rah Corrado		
			ame of Person		
		Fer	nwick & West	LLP	
			m/Company		
		902 B	roadway, Suite	: 14	
			Address		
		New	York, NY 100	10	
	•		State and Zip		
		scorra	ido@fenwick.	com	<u></u>
		E-mail address: (to be	e used for futu	re annual report r	notification)
For fur	rther information	concerning this matter, p	olease call:		
Je	oshua H. Bilenke	er at (203)	658-4749	
	Name of Perso		ea Code	Daytime Telep	hone Number
	Registration Se Division of Co The Centre of	rporations Γallahassee be Street, Suite 810		MAILING A Registration S Division of Co P.O. Box 632' Tallahassee, F	ection orporations 7
Please		the following amount: le to: FLORIDA DEPAR'I \$\Boxed{\Boxesian}\$ \$\$\\$ \$78.75\$ Filing Fee \$\dagger{\text{6}}\$\$		ATE 5 Filing Fee &	
0,0, ـــ	.oo i iiiig i cc	Certificate of Statu		fied Copy	Certificate of Status &

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.

(ii dane diavan	ble in Florida, enter alternate corporate name ac	dopted for the purpose of transacting	business in Florida)
. <u>DE</u>	3 y under the law of which it is incorporated)	EIN 86-1568782	
(State or countr	y under the law of which it is incorporated)	(FEI number, if appl	icable)
1/19/2	021 5 of incorporation)		
(Date	of incorporation)	(Date of duration, if other tha	ın perpetual)
•	April 1, 2021 (Date first transacted business in 1		
		uthfield Avenue, Suite 100, Stamford, estreet address) address, if different)	CT 06902
		Box NOT acceptable)	
Name and stree	t address of Florida registered agent: (P.O.		
. Name and <u>stree</u> Name:	t address of Florida registered agent: (P.O. Corporation Service Company		021 A
			2021 APR - 2
Name:	Corporation Service Company 1201 Hays Street		N
Name:	Corporation Service Company 1201 Hays Street		021 APR -2 AM II:

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.

Corporation Service Company

By: fraud & flum.

A. DIRECTORS Name: Joshua H. Bilenker _____ □ Chairman Name: □ Chairman □ Vice Chairman Address: <u>c/o Treeline Biosciences, Inc., 68</u> □Vice Chairman Address: Southfield Avenue, Suite 100, Stamford, CT 06902 **⊠**Director □ Director De President □President □Vice President _____ ☐ Vice President Secretary 3 □ Secretary □Treasurer □Other _____ □Other _____ □Other _____ □Other ____ □ Chairman Name: □ Chairman Name: _____ Address: □Vice Chairman Address: □Vice Chairman □ Director □Director □President □President □ Vice President _____ ☐ Vice President □ Secretary ☐ Treasurer □ Secretary □ Treasurer □Other _____ □Other _____ □Other _____ ☐Other ____ □ Chairman Name: _____ □ Chairman Name: ______ □Vice Chairman Address: □ Vice Chairman Address: ______ □ Director □Director □President □President □ Vice President _____ □ Vice President ☐ Secretary □Treasurer ☐ Secretary □ Treasurer □Other _____ □Other _____ □Other _____ □Other _____ ___ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. Joshua H. Bilenker

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.

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THAT THE SAID "JHB EXPLORATIONS,
INC.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO
"TREELINE BIOSCIENCES, INC." ON THE FIFTH DAY OF MARCH, A.D.
2021, AT 11:40 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF

DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE

EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE

RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT

BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TREELINE BIOSCIENCES, INC." WAS INCORPORATED ON THE NINETEENTH DAY OF JANUARY, A.D. 2021.



Authentication: 202876273

Date: 04-01-21