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Foreign Limited Liability Company Oxford Amherst LLC

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		Abbvie Inc.					
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	•			Address			
	North	Chicago IL	, 600	64-1802			
			City/Sta	te and Zip Code			
	jawad.zaycd@abi						
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Upon Qualification (Date first transacted business in Florida, If prior to regist (See sections 605.0904 & 605.0905, F.S. to determine penality (See sections 605.0904 & 605.0905, F.S. to determine penality (Street Address of Principal Office) Same (Mailing Address) The name, title or capacity and address of the person(s) who has/have william J. Chage, Manager 1 North Waukegan Road North Chicago, 1L 60064 Attached is an original certificate of existence, no more than 90 days aving custody of records in the jurisdiction under the law of which it is	A CONTROL OF STATE OF
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aving custody of records in the jurisdiction under the law of which it is	
Signature of an authorized person accordance with section 605 0203, F.S., the execution of this document constitutes an affirmation under a sware that any false information submitted in a document to the Department of State constitutes a third William J. Chase	s organized. (A photocopy is not contificate under oath of the trace of perjury that the facts stated here the penalties of perjury that the facts stated here

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

I. The name of the Limited Liability Company is:	
Oxford Amherst ELC	_
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	_ -
C T Corporation System	
(Name)	MAY 22
1200 South Pine Island Road	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	FM 4:5
Plantation FL 33324	(X)
Clty/State/Zip	
Having been named as registered agent and to accept service of process for the above stated limite liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes. C T Corporation System	all
Programme and the second secon	
By: (Signature)	

\$ 100.00 Filing Fee for Application
 \$ 25.00 Designation of Registered Agent
 \$ 30.00 Certified Copy (optional)
 \$ 5.00 Certificate of Status (optional)

STORY WITH

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OXFORD AMBERST LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF MAY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OXFORD AMHERST LLC" WAS FORMED ON THE THIRD DAY OF MARCH, A.D. 2015.

150737265

DATE: 05-21-15