

#15000001651

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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15 APR 17 AM 10:39  
U.S. DEPARTMENT OF JUSTICE  
FEDERAL BUREAU OF INVESTIGATION

1115-16284

MD 4/20



2360 Corporate Circle- Suite 400  
Henderson, NV 89074-7722

Phone 702.866.2500  
Toll-Free 800.2.INCORP (1-800-246-2677)  
Fax 702.866.2689

[www.incorp.com](http://www.incorp.com)

Thursday, February 12, 2015

**Attn: Whitlow, Chip**  
Norbrook Inc.  
9733 Loiret Boulevard  
Lenexa, KS 66219  
United States

Dear Chip:

Enclosed please find the Application by Foreign Corporation for Norbrook Inc. in FL. Please have authorized officer review and sign document. Submit to the FL Secretary of State with any additional documents and the corresponding filing fee of \$70.00. Have a great day!

Thank you so much for your business. If you have any questions or comments please let us know!

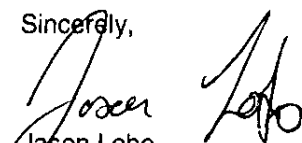
If you haven't already, I suggest you take a moment to check out your account. Here you can view the filing status of all your entities, view and pay your invoices, view any documents we have handled for you, use our forms library, use our link directory to state offices relevant to your filings, or order new services.

If you don't know your login information, you can retrieve it online at <https://www.incorp.com/login.aspx> by clicking Forgot Password. In the rare case that you don't have Silverlight installed on your computer, you may be prompted to install it. Don't worry. This is a very secure plug-in and will not harm your computer. Proceed with the installation and let me know if you need assistance.

Thank you for choosing InCorp Services, Inc.!

If you have any questions, please contact me at (800) 246-2677 from 6am to 6pm PST.

Sincerely,

  
Jason Lobo  
Order Processor

FEB 12 2015



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 6, 2015

JENNIFER SCHNEIDER  
STATE LICENSE SERVICING INC.  
1751 RTE 17A, STE.3  
FLORIDA, NY 10921

SUBJECT: NORBROOK PHARMACEUTICALS INC.  
Ref. Number: W15000016284

We have received your document for NORBROOK PHARMACEUTICALS INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Maryanne Dickey  
Regulatory Specialist II

Letter Number: 715A00004652



STATE LICENSE SERVICING, LLC  
1751 State Route 17A Suite 3  
Florida, NY 10921  
Tel. 845/544-2482  
Fax. 845/544-2481  
statelicensesservicing.com

**VIA PRIORITY MAIL**

April 14, 2015

Florida Department of State  
Division of Corporation  
2661 Executive Center Circle  
Tallahassee, FL 32301  
Attn: Maryanne Dickey

**Re: Norbrook Pharmaceuticals Inc. (Ref. Number: W15000016284)**

Dear Ms. Dickey

In accordance to the deficiency on behalf of our client Norbrook Pharmaceuticals Inc, please find enclosed the Certificate of Good Standing from the State of Colorado.

Please advise if any further information is needed to satisfy the deficiency.

Thank you for your kind attention to this matter.

Thank you,

Donna Tyburczy  
State License Servicing, Inc.  
(845) 544-2482 Ext. 222  
dtyburczy@slny.com

Enc: Deficiency Letter  
Certificate of Good Standing

RECEIVED  
15 APR 17 AM 11:30  
SEC 17-11-17  
TALLAHASSEE, FL 32301

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** NORBROOK 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:

JENNIFER SCHNEIDER

Name of Person

STATE LICENSE SERVICING INC.

Firm/Company

1751 RTE 17A, STE. 3

Address

FLORIDA, NY 10921

City/State and Zip code

NOR@SLSNY.COM

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

For further information concerning this matter, please call:

JENNIFER SCHNEIDER at ( 845 ) 544-2482 X207

Name of Person

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

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

**MAILING ADDRESS:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- |  |  |   |   |
|--|--|---|---|
| <input checked="" type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee,<br>Certificate of Status &<br>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. **NORBROOK INC.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

**NORBROOK PHARMACEUTICALS INC.**

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. **COLORADO**

(State or country under the law of which it is incorporated)

3. **84-1110641**

(FEI number, if applicable)

4. **08/11/1989**

(Date of incorporation)

5. **PERPETUAL**

(Duration: Year corp. will cease to exist or "perpetual")

6. **FEBRUARY 12, 2015**

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

7. **9733 LOIRET BOULEVARD, LENEXA, KS 66219**

(Principal office address)

**9733 LOIRET BOULEVARD, LENEXA, KS 66219**

(Current mailing address)

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

Name: **INCORP SERVICES, INC.**

Office Address: **17888 67TH COURT NORTH**


**LOXAHATCHEE, FL 33470**

(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.*

 Sera Bratigan on behalf of Incorp Services, Inc.  
(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: \_\_\_\_\_

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

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

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

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

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

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

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

**B. OFFICERS**

President: MICHAEL KENT

Address: 9733 LOIRET BOULEVARD

LENEXA, KS 66219

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. 

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 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. MICHAEL KENT

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

OFFICE OF THE SECRETARY OF STATE  
OF THE STATE OF COLORADO

**CERTIFICATE**

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

**Norbrook Inc.**

is a **Corporation** formed or registered on 08/11/1989 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 19891086193.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 03/24/2015 that have been posted, and by documents delivered to this office electronically through 03/25/2015 @ 15:29:11.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 03/25/2015 @ 15:29:11 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 9136971.



Secretary of State of the State of Colorado

\*\*\*\*\*End of Certificate\*\*\*\*\*

*Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, <http://www.sos.state.co.us/biz/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us/> click Business Center and select "Frequently Asked Questions."*