

F18000005336

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

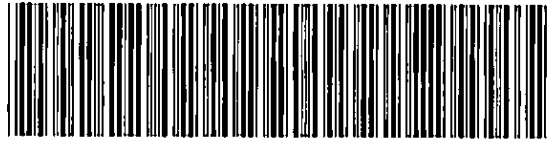
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TALLAHASSEE, FLORIDA

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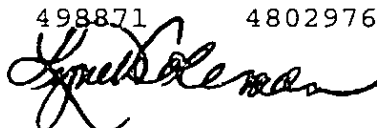
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CLS
11-26-18

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

ACCOUNT NO. : I20000000195

REFERENCE : 498871 4802976

AUTHORIZATION : 

COST LIMIT : \$ 70.00

ORDER DATE : November 20, 2018

ORDER TIME : 9:37 AM

ORDER NO. : 498871-010

CUSTOMER NO: 4802976

FOREIGN FILINGS

NAME: TITAN PHARMACEUTICALS, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER: _____

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.

Titan Pharmaceuticals, Inc.

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

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

2. Delaware 3. 94-3171940
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. February 7, 1992 5. _____
(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. 400 Oyster Point Blvd., Suite 505, South San Francisco, CA 94080
(Principal office address)

(Current mailing address, if different)

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.

Corporation Service Company

By: Roxanne Turner

(Registered agent's signature)

Roxanne Turner
Asst. Vice President

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.

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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Marc Rubin, M.D.

Address: 400 Oyster Point Blvd., Suite 505, South San Francisco, CA 94080

Vice Chairman: Rajinder Kumar

Address: 400 Oyster Point Blvd., Suite 505, South San Francisco, CA 94080

Director: M. David MacFarlane

Address: 400 Oyster Point Blvd., Suite 505, South San Francisco, CA 94080

Director: James R. McNab, Jr.

Address: 400 Oyster Point Blvd., Suite 505, South San Francisco, CA 94080

B. OFFICERS

President: Sunil Bhonsle

Address: 400 Oyster Point Blvd., Suite 505, South San Francisco, CA 94080

Vice President: Katherine Beebe DeVarney

Address: 400 Oyster Point Blvd., Suite 505, South San Francisco, CA 94080

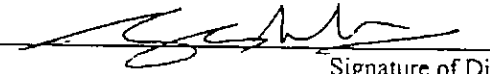
Secretary: Sunil Bhonsle

Address: 400 Oyster Point Blvd., Suite 505, South San Francisco, CA 94080

Treasurer: Brian Crowley

Address: 400 Oyster Point Blvd., Suite 505, South San Francisco, CA 94080

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 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. Sunil Bhonsle, Chief Executive Officer, President and Secretary

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

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TALLAHASSEE, FLORIDA

Attachment to Application by Foreign Corporation For Authorization to Transact Business in
Florida

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

A. Directors (continued):

Director: Joseph Akers

Address: 400 Oyster Point Blvd., Suite 505, South San Francisco, CA 94080

Director: Sunil Bhonsle

Address: 400 Oyster Point Blvd., Suite 505, South San Francisco, CA 94080

Director: Marc Rubin

Address: 400 Oyster Point Blvd., Suite 505, South San Francisco, CA 94080

Director: Frederico Seghi Reli

Address: 400 Oyster Point Blvd., Suite 505, South San Francisco, CA 94080

Director: Scott Smith

Address: 400 Oyster Point Blvd., Suite 505, South San Francisco, CA 94080

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TALLAHASSEE, FLORIDA

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TITAN 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 TWENTIETH DAY OF NOVEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TITAN PHARMACEUTICALS, INC." WAS INCORPORATED ON THE SEVENTH DAY OF FEBRUARY, A.D. 1992.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line.

Jeffrey W. Bullock, Secretary of State

2287466 8300

SR# 20187749898

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203943514

Date: 11-20-18