2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000000217

Entity Name: BAYER HEALTHCARE LLC

Current Principal Place of Business:

100 BAYER BOULEVARD WHIPPANY, NJ 07981

Current Mailing Address:

100 BAYER BOULEVARD WHIPPANY. NJ 07981 US

FEI Number: 06-1653795 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED Jan 05, 2018

Secretary of State

CC1807732447

Authorized Person(s) Detail:

Title MANAGER Title MANAGER

Name STEVENSON, ALAN Name MEHTA, ASSEEM

Address 800 DWIGHT WAY Address 100 BAYER BOULEVARD

City-State-Zip: BERKELEY CA 94710 City-State-Zip: WHIPPANY NJ 07981

Title MANAGER Title MANAGER

Name APEL, DANIEL Name CELLA, DANIEL J.

Address 100 BAYER BOULEVARD Address 100 BAYER ROAD

City-State-Zip: WHIPPANY NJ 07981 City-State-Zip: PITTSBURGH PA 15205

Title MANAGER Title MANAGER

Name RAMAMURTHY, GURU Name MCBRIDE, JAMES E.
Address 100 BAYER BOULEVARD Address 100 BAYER ROAD

City-State-Zip: WHIPPANY NJ 07981 City-State-Zip: PITTSBURGH PA 15205

Title MANAGER Title MONACHELLO

Name HEINEMANN, JAN Name MONACHELLO, JESSICA

Address 100 BAYER BOULEVARD Address 12809 SHAWNEE MISSION PARKWAY

City-State-Zip: WHIPPANY NJ 07981 City-State-Zip: SHAWNEE KS 66216

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RICHARD K. HELLER

Electronic Signature of Signing Authorized Person(s) Detail

MANAGER

01/05/2018

Date

Authorized Person(s) Detail Continued:

Title MANAGER Title MANAGER

NameABRAMS, KEITH R.NameJOSEPH, MARIO G.Address100 BAYER ROADAddress100 BAYER ROAD

City-State-Zip: PITTSBURG PA 15205 City-State-Zip: PITTSBURGH PA 15205

Title MANAGER Title MANAGER

Name MCDONALD, MICHAEL J. Name BLAKE, PHILIP

Address 100 BAYER BOULEVARD Address 100 BAYER BOULEVARD

City-State-Zip: WHIPPANY NJ 07981 City-State-Zip: WHIPPANY NJ 07981

Title MANAGER Title MANAGER

NameHELLER, RICHARD K.NameDODERO, WILLIAMAddress100 BAYER ROADAddress36 COLOMBIA ROAD

City-State-Zip: PITTSBURG PA 15205 City-State-Zip: MORRISTOWN NJ 07962-1910

P.O. BOX 1910