

2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000004366

Entity Name: AEROPHARM TECHNOLOGY, LLC

Current Principal Place of Business:

1 N. WAUKEGAN ROAD,
D-V367/AP34-3NE TAX DEPT
NORTH CHICAGO, IL 60064

Current Mailing Address:

1 N. WAUKEGAN ROAD,
D-V367/AP34-3NE TAX DEPT
NORTH CHICAGO, IL 60064 US

FEI Number: 22-3242597

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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

Authorized Person(s) Detail :

Title MANAGER
Name CHASE, WILLIAM
Address 1 N. WAUKEGAN ROAD
City-State-Zip: NORTH CHICAGO IL 60064

Title AUTHORIZED MEMBER
Name KOS PHARMACEUTICALS INC.
Address 1 N. WAUKEGAN ROAD
 D-V367/AP34 (AR)
City-State-Zip: NORTH CHICAGO IL 60064

Title VP, TAX
Name REENTS, SCOTT T
Address 1 N. WAUKEGAN ROAD,
 D-V367/AP34-3NE TAX DEPT
City-State-Zip: NORTH CHICAGO IL 60064

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: SCOTT T REENTS

VICE PRESIDENT, TAX

05/01/2019

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date