

**2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M09000004219

**Entity Name:** WARNER CHILCOTT SALES (US), LLC

**Current Principal Place of Business:**

1 N. WAUKEGAN ROAD  
NORTH CHICAGO, IL 60064

**FILED**  
**May 01, 2023**  
**Secretary of State**  
**8632333201CC**

**Current Mailing Address:**

1 N. WAUKEGAN ROAD  
TAX DEPARTMENT AP34-3  
NORTH CHICAGO, IL 60064 US

**FEI Number: 80-0479718**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS NETWORK INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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 SOLE MEMBER  
Name ALLERGAN USA, INC.  
Address 5 GIRALDA FARMS  
City-State-Zip: MADISON NJ 07940

Title VP  
Name BRISTOW, LINDSEY  
Address 1 N WAUKEGAN ROAD  
City-State-Zip: NORTH CHICAGO IL 60064

Title ASST. SECRETARY  
Name CORBIN, JOHANNA M  
Address 1 N WAUKEGAN ROAD  
City-State-Zip: NORTH CHICAGO IL 60064

Title ASST. SECRETARY  
Name KLINTWORTH, WAYNE  
Address 1 N WAUKEGAN ROAD  
City-State-Zip: NORTH CHICAGO IL 60064

Title MANAGER AND PRESIDENT  
Name REENTS, SCOTT T  
Address 1 N WAUKEGAN ROAD  
City-State-Zip: NORTH CHICAGO IL 60064

Title TREASURER  
Name PURDUE, DAVID R  
Address 1 N WAUKEGAN ROAD  
City-State-Zip: NORTH CHICAGO IL 60064

Title ASST. SECRETARY  
Name WEITH, EMILY  
Address 1 N WAUKEGAN ROAD  
City-State-Zip: NORTH CHICAGO IL 60064

Title ASST. SECRETARY  
Name BIRTHEISEL, STOCKTON  
Address 1 N. WAUKEGAN ROAD  
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: LINDSEY BRISTOW**

**VICE PRESIDENT**

**05/01/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date