## **2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M17000000898

Entity Name: BIOVERATIV PACIFIC LLC

**Current Principal Place of Business:** 

225 2ND AVENUE WALTHAM, MA 02451

Current Mailing Address:

225 2ND AVENUE

WALTHAM, MA 02451 US

FEI Number: 30-0949542 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 22, 2019

**Secretary of State** 

7473203432CC

## Authorized Person(s) Detail:

Title MEMBER Title VP

NameBIOVERATIV THERAPEUTICS INC.NameDUVALL,, DIANTHAAddress225 2ND AVENUEAddress225 2ND AVENUECity-State-Zip:WALTHAM MA 02451City-State-Zip:WALTHAM MA 02451

Title ASST. SECRETARY Title ASST. SECRETARY Name LOWEN, , CARA Name GILMAN,, MATTHEW Address 225 2ND AVENUE Address 225 2ND AVENUE WALTHAM MA 02451 City-State-Zip: City-State-Zip: WALTHAM MA 02451

Title SECRETARY Title CFO

Name NESTOR, JOANN Name SAUVAGE,, PHILIPPE

Address 225 2ND AVENUE Address 1000 RESEARCH PARKWAY

City-State-Zip: WALTHAM MA 02451 City-State-Zip: MERIDIEN CT 06450

Title PRESIDENT Title TREASURER

Name SIBOLD,, WILLIAM Name TOLPA,, MICHAEL J

Address 225 2ND AVENUE Address 1000 RESEARCH PARKWAY

City-State-Zip: WALTHAM MA 02451 City-State-Zip: MERIDIEN CT 06450

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: JOANN NESTOR

**SECRETARY** 

01/22/2019