

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000002329

**Entity Name:** ARISTA MOLECULAR, INC.**Current Principal Place of Business:**2075 CORTE DEL NOGAL  
SUITE G  
CARLSBAD, CA 92011**Current Mailing Address:**2075 CORTE DEL NOGAL  
SUITE G  
CARLSBAD, CA 92011 US**FEI Number:** 20-8786944**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

**Officer/Director Detail :**

Title           TREASURER  
Name           MCFADEN, FRANK T  
Address       2200 PENNSYLVANIA AVE., NW SUITE  
                 800W  
City-State-Zip: WASHINGTON DC 20037

Title           DIRECTOR, VP  
Name           MCFADEN, FRANK T  
Address       2200 PENNSYLVANIA AVE., NW SUITE  
                 800W  
City-State-Zip: WASHINGTON DC 20037

Title           VP  
Name           CORNELL, BRETT A  
Address       2200 PENNSYLVANIA AVE  
                 NW SUITE 800W  
City-State-Zip: WASHINGTON DC 20037

Title           DIRECTOR, PRESIDENT  
Name           LUTZ, ROBERT S  
Address       2200 PENNSYLVANIA AVE., NW SUITE  
                 800W  
City-State-Zip: WASHINGTON DC 20037

Title           SECRETARY, VP  
Name           O'REILLY, JAMES F  
Address       2200 PENNSYLVANIA AVE.  
                 NW SUITE 800W  
City-State-Zip: WASHINGTON DC 20037

Title           CFO  
Name           MUELLER, KNUD  
Address       2075 CORTE DEL NOGAL  
                 SUITE G  
City-State-Zip: CARLSBAD CA 92011

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: FRANK T. MCFADEN****VICE PRESIDENT****05/11/2020**

Electronic Signature of Signing Officer/Director Detail

Date