

2016 FOREIGN PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F15000000987

Entity Name: ICAHN SCHOOL OF MEDICINE AT MOUNT SINAI, INC.

Current Principal Place of Business:

1 GUSTAVE L. LEVY PLACE
NEW YORK, NY 10029

Current Mailing Address:

1 GUSTAVE L. LEVY PLACE
NEW YORK, NY 10029

FEI Number: 13-6171197

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC
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: MADONNA CUDDIHY, ASSISTANT SECRETARY

10/17/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PCEO
Name DAVIS, KENNETH
Address 1 GUSTAVE L. LEVY PLACE
City-State-Zip: NEW YORK NY 10029

Title EXVP
Name KLEIN, ARTHUR
Address 1 GUSTAVE L. LEVY PLACE
City-State-Zip: NEW YORK NY 10029

Title SEVP
Name SCANLON, DONALD
Address 1 GUSTAVE L. LEVY PLACE
City-State-Zip: NEW YORK NY 10029

Title TEVP
Name ESSIG, BETH
Address 1 GUSTAVE L. LEVY PLACE
City-State-Zip: NEW YORK NY 10029

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: ARTHUR KLEIN

EXVP

10/17/2016

Electronic Signature of Signing Officer/Director Detail

Date