

Division of Corporations
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Division of Corporations

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Account Number: 12000000195

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Phone Fax Number

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08 FEB - I AMII: 20
SECRETARY OF STATE
OF AHASSEE, FLORID.

## COR AMND/RESTATE/CORRECT OR O/D RESIGN

SECRETARY OF STATE ALLAHASSEE, FLORID

#### NOVARTIS NUTRITION CORPORATION

Certificate of Status	0
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# PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

	SECTION			
(1-3 must be completed)		> 00	03	
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		≥3:	FEB	
834304		<b>P</b>	œ	-
(Document number of corporation (if known)		10 m		-
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1 Novartis Nutrition Corporation		<u></u> q	至	1 1
~ ·	t appears on the records of the Department of State)	70		—€
	· · · · · · · · · · · · · · · · · · ·	28		
2. Delaware	3.05/05/1995	5.5	20	
(Incorporated under laws of)	(Date authorized to do busine	es in Plotida)		
(Alboriportates about 14-14-01)	(17000 diamonation to distribution	an arr a lostrare)		
<b>24 =</b>	SECTION II			
(4-7 COMPLET	e only the applicable changes)			
·				
<ol> <li>If the amendment changes the name of the co</li> </ol>	exporation, when was the change effected unde	r the laws o	f	
its jurisdiction of incorporation? 01/11/08,	effective 02/01/08			
and a more paramous.				
5 Nestle HealthCare Nutrition, Inc.				
(Name of corporation after the amendment, a	dding suffix "corporation," "company," or "in	corporated	" or	,-,
appropriate abbreviation, if not contained in	new name of the corporation)	-	•	
77.7			<u>,.                                    </u>	_
	alternate corporate name adopted for the purpo	se of transa	cting	
business in Florida)			,	
<ol><li>If the amendment changes the period of durat</li></ol>	tion, indicate new period of duration.			
				•
	(New duration)			
7. If the amendment changes the jurisdiction of	incorporation indicate new insignistion			
. It and amendment changes the jurisdiction of	moorporation, mineate new jantationen.			
A.I	(New jurisdiction)			
$\mathcal{O}(0)$				
A 10				
(Signature of a director, president or other offi	cer - if in the hands			
of a receiver or other court appointed fiduciary	y, by that fiduciary)			
David Vales	Presiden	ナ		
(Typed or printed name of pers	on signing) (Title of person	n signing)	-	

# Delaware

DAGE 1

## The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "NOVARTIS NUTRITION CORPORATION", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "NESTLE HEALTHCARE NUTRITION, INC.", THE ELEVENTH DAY OF JANUARY, A.D. 2008, AT 11:30 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF AMENDMENT IS THE FIRST DAY OF FEBRUARY, A.D. 2008.

AND I DO BEREBY FURTHER CERTIFY THAT THE AFORESAID

CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF

DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE

EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE

RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT

BUSINESS.

AND I DO BEREBY FURTHER CERTIFY THAT THE SAID "NOVARTIS NUTRITION CORPORATION" WAS INCORPORATED ON THE TWENTY-FIRST DAY OF NOVEMBER, A.D. 1972.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES

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You may verify this certificate colina at corp delawage cov/suthwer shrel

Warnet Smith Hindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6353492

DATE: 02-01-08