Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000139316 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023

: (850)222-1092

Fax Number

: (850)878-5368

Enter the smail address for this business entity to be used for future annual report mailings. Enter only one smail address please.**

COR AMND/RESTATE/CORRECT OR O/D RESIGN WATSON PHARMA, INC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Watson Pharma, Inc. Name of Corporation
DOCUMENT NUMBER: F01000003775
The enclosed Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Flease tellan an correspondence concerning this matter to the following.
CT to pick up
Name of Contact Person
Firm/Company
Address
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (
Enclosed is a check for the following amount:
\$35.00 Filing Fee S43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations Clifton Building Tallahassee, FL 32301

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.)

	SEC (1-3 MUST E	CTION I BE COMPLETED)			
	•	000003775			νu
(Document number of corporation (if known)				I3 JUN	DIVISION
1.	Watson	Pharma, Inc.		2	- 유 - 유
	(Name of corporation as it appears of	on the records of the Departs	nent of State)	Ф	25
2	Delaware	3,	07/17/2001		공유
	(Incorporated under laws of)	Epate author	ized to do business in Fior	69.	OF CORPORATIONS
	SEC (4-7 complete only 1	CTION II THE APPLICABLE CHAN	ges)		S
4. If t	he amendment changes the name of the corporatio	n, when was the change	effected under the la	ws of	
its	jurisdiction of incorporation? June 18, 20	13			
N	avis Pharma, Inc. ame of corporation after the amendment, adding su propriate abbreviation, if not contained in new na	offix "corporation," "come of the corporation)	mpany," or "incorport	ated," or	
(If i	new name is unavailable in Florida, enter alternate siness in Florida)	corporate name adopte	d for the purpose of tr	ansacting	3
6. If t	he amendment changes the period of duration, ind	licate new period of dur	ation.		
	(Nev	w duration)			
7. If t	he amendment changes the jurisdiction of incorpor	ration, indicate new jur	isdiction.		
	•	jurisdiction)			
8. Att 90 hav	ached is a certificate or document of similar importants prior to delivery of the application to the Depring custody of corporate records in the jurisdiction	rt, evidencing the amen partment of State, by the n under the laws of whi	dment, authenticated as Secretary of State or ich it is incorporated.	not more other of	than ficial
	(Signature of a director, president or other officer - if in of a receiver or other court appointed fiduciary, by that	fiduciary)	Affairs and Asst.	Smooth	יטי
	(Typed or printed name of person signing)	YT LEGAL	Affairs and Asst.	Secreta	4

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAMARE, DO HEREBY CERTIFY THAT THE SAID "WATSON PHARMA, INC.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "ACTAVIS PHARMA, INC.", THE EIGHTEENTH DAY OF JUNE, A.D. 2013, AT 12:18 O'CLOCK P.M.

2352578 8320

DATE: 06-18-13