

F05000001037

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

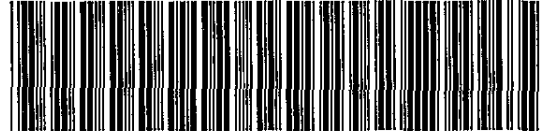
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

[Handwritten signature]

Office Use Only



700046340887

FILED
05 FEB 17 PM 3:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
05 FEB 17 PM 4:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 208265 4722275

AUTHORIZATION

Patricia Pigato

COST LIMIT : \$ 78.75

FILED
05 FEB 17 PM 3:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : February 16, 2005

ORDER TIME : 11:09 AM

ORDER NO. : 208265-005

CUSTOMER NO: 4722275

CUSTOMER: Jennifer Curran, Legal Asst
Harris Beach LLP F/k/a
One Cumberland Avenue

Plattsburgh, NY 12901

FOREIGN FILINGS

NAME: OCTAPharma USA, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward -- EXT# 2935

EXAMINER: _____

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

FILED
FEB 17 PM 3:19
TALLAHASSEE
SECRETARY OF STATE
FLORIDA

1. Octapharma USA, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Virginia

(State or country under the law of which it is incorporated)

3. 75-3113527

(FEI number, if applicable)

4. March 21, 2003

(Date of incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. 1/2004

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 5885 Trinity Parkway, Suite 350, Centreville, VA 20120

(Principal office address)

5885 Trinity Parkway, Suite 350, Centreville, VA 20120

(Current mailing address)

8. Sale of pharmaceutical products

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee

(City)

Florida 32301

(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Corporation Service Company

By: Deborah D. Skipper

(Registered agent's signature)

Deborah D. Skipper
Asst. V. Pres.

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Please see attached Officers/Directors rider

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Please see attached Officers/Directors rider

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. Douglas J. Glenn, Esq., Secretary

(Typed or printed name and capacity of person signing application)

OCTAPHARMA USA, INC.
5885 Trinity Parkway, Suite 350
Centreville, Virginia 20120

APPLICATION FOR CERTIFICATE OF AUTHORITY
OFFICERS/DIRECTOR RIDER

President	Kim Björnstrup Octapharma AG Siedenstrasse 2 CH-8853 Lachen, Switzerland
Secretary	Douglas J. Glenn, Esq. Pender & Coward 222 Central Park Avenue Virginia Beach, VA 23462-3026
Treasurer	Karl Erik Clausen Octapharma AG Siedenstrasse 2 CH-8853 Lachen, Switzerland
Director	Tobias Marguerre Octapharma AG Siedenstrasse 2 CH-8853 Lachen, Switzerland

Commonwealth of Virginia



State Corporation Commission

I Certify the Following from the Records of the Commission:

OCTAPHARMA USA, INC. is a corporation existing under and by virtue of the laws of Virginia, and is in good standing.

The date of incorporation is March 21, 2003.

Nothing more is hereby certified.



*Signed and Sealed at Richmond on this Date:
February 1, 2005*

Joel H. Peck

Joel H. Peck, Clerk of the Commission