2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F09000002174

FILED Dec 09, 2014 Secretary of State

Entity Name: COALITION FOR PULMONARY FIBROSIS INC.

Current Principal Place of Business: New Principal Place of Business:

10866 W WASHINGTON BLVD

343

CULVER CITY, CA 90232

Current Mailing Address: New Mailing Address:

10866 W WASHINGTON BLVD

CULVER CITY, CA 90232

FEI Number: 91-2144423 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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: KRISTINA UNUTOA

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Γitle: CEO

Name: MICHON, MISHKA

Address: 10866 W WASHINGTON BLVD #343

City-St-Zip: CULVER CITY, CA 90232

Title: DIR

Name: UNUTOA, KRISTINA

Address: 10866 W WASHINGTON BLVD #343

City-St-Zip: CULVER CITY, CA 90232

Title: VP

Name: TOSI, TERESA

Address: 10866 W WASHINGTON BLVD #343

City-St-Zip: CULVER CITY, CA 90232

Title:

Name: HWANG, SU

Address: 10866 W WASHINGTON BLVD #343

City-St-Zip: CULVER CITY, CA 90232

Title: 0

Name: SCHWARTZ, MARVIN

Address: 10866 W WASHINGTON BLVD #343

City-St-Zip: CULVER CITY, CA 90232

Title: C

Name: TINO, GREGORY

Address: 10866 W WASHINGTON BLVD #343

City-St-Zip: CULVER CITY, CA 90232

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KRISTINA UNUTOA CFO 12/09/2014