Division on corporations Flori da Departurier, el State Division of corporations	
Electronic Filing Cover Sheet 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.	
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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet <b>* PL-SIB</b>	MIT*
To: Division of Corporations Fax Number : (850)617-6381 date of submis	-
From: Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368	SECRET SECRET
**Enter the email address for this business entity to be used for fu annual report mailings. Enter only one email address please.** Email Address:	ARYS OF STATEA
FOREIGN PROFIT/NONPROFIT CORPORATION Ben Venue Laboratories, Inc.	AS 1
Certificate of Status0Certified Copy0Page Count05 (y)Estimated Charge\$3,285.00	SEP 15 PM 3: 27 CRETARY OF STATE LAHASSEE, FLORIDA

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September 15, 2011

T CORPORATION SYSTEM

FLORIDA DEPARTMENT OF STATE Division of Corporations

SUBJECT: BEN VENUE LABORATORIES, INC. REF: W11000047675 ۳۳۳ \*RE-SUBMIT\* Please retain original filing date of submission <u>عربط</u>

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$3285.00.

If you have sny further questions concerning your document, please call (850) 245-6949.

Thomas Chang Regulatory Specialist II New Filing Section FAX Aud. #: H11000225454 Letter Number: 311A00021368

P.O BOX 6327 - Tallahassee, Florida 32314

## **COVER LETTER**

TO:	New Filing Section
	Division of Corporations

SUBJECT: Ben Venue Laboratories, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Moredith Steirer

Name of Person
Firm/Company

300 Northfield Road

Ben Venue Laboratories, Inc.

Address

Bedford, OH 44146

City/State and Zip code

meredith.steirer@boehringer-ingelheim.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Meredith Steirer** 

Name of Person

0 ) 703-7606

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Taliahassee, FL 32314

Enclosed is a check for the following amount:

570.00 Filing Fee

\$78.75 Filing Fee & Certificate of Status

at (

Certified Copy

\$87.50 Filing Fee, Certificate of Status & Certified Copy

FLOW - 6101/2011 C T System Online

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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

1.	Ben Venue Laboratories, Inc.					
	(Enter name of corporation; must include "INCORPORATEI "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	D," "COMPANY," "CORPORATION,"				
	(If name unavailable in Florida, enter alternate corporate nam	e adopted for the purpose of transacting business in Florida)				
٦	Delaware	25-0350592				

under the law of which it is incorporated)		(FEI number, if applicable)	
	5.	perpetual	
of incorporation)		(Duration: Year corp. will cease to exist or "p	cipetual")
toad, Bedford, OH 44146			
(Principal office	add	ress)	
oad, Bedford, OH 44146			B.,
(Current mailing	add	Iress)	
			TI SEP
et address of Florida registered agent:	(P.C	D. Box <u>NOT</u> acceptable)	ASS A
C T Corporation System			Eng PL
1200 South Pine Island Road			FLOR FLOR
		22274	-m -
Plantation		, Florida <sup>33324</sup>	
	(Date first transacted busin (SEE SECTIONS 607.1501 & 60 Road, Bedford, OH 44146 (Principal office coad, Bedford, OH 44146 (Current mailing opment, manufacture, marketing and distribus) of corporation authorized in home state et address of Florida registered agent: C T Corporation System	(Date first transacted business i (SEE SECTIONS 607.1501 & 607.1 Road, Bedford, OH 44146 (Principal office add .oad, Bedford, OH 44146 (Current mailing add opment, manufacture, marketing and distributions) of corporation authorized in home state or co et address of Florida registered agent: (P.C. <u>C T Corporation System</u>	5. perpetual (Duration: Year corp. will cease to exist or "p (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) Road, Bedford, OH 44146 (Principal office address) Road, Bedford, OH 44146 (Current mailing address) soment, manufacture, marketing and distribution of pharmaceutical products a) of corporation authorized in home state or country to be carried out in state of Florida) et address of Florida registered agent: (P.O. Box <u>NOT</u> acceptable) <u>C T Corporation System</u>

## 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 designuted in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I furthet 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.

C T Corporation System Connie Bryan By: Assistant Secretary 0 m (Registered agent's signature)

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.

EL019 - 03/01/3011 C 1' System Desine

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FILED 11 SEP 14 AM 10: 19 12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: J. Martin Carroll Address: Bochringer Ingelheim USA Corporation, 900 Ridgebury Road, Ridgefield, CT 06877 Vice Chairman: <u>n/a</u> Address: **Robert Fromuth** Director: Boehringer Ingelheim GmbH, D-55216 Ingelheim am Rhein, Germany Address: George Doyle Director: Ben Venue Laboratories, 300 Northfield Road, Bedford, OH 44146 ddress: **B. OFFICERS** President: George Doyle Address: Ben Venue Laboratories, 300 Northfield Road, Bedford, OH 44146 Vice President: Stefan Rinn (SVP and CFO) Boehringer Ingelheim USA Corporation, 900 Ridgebury Road, Ridgefield, CT 06877 MAddress: Maria Persky (SVP & Secretary), Boehringer Ingelheim USA Corporation, 900 Ridgebury Road, Ridgefield, CT 06877 Joshua M. Marks (Assistant Secretary) Secretary: Address: Ben Venue Laboratories, 300 Northfield Road, Bedford, OH 44146 William A. Owen (Assistant Treasurer) Treasurer: Ben Venue Laboratories, 300 Northfield Road, Bedford, OH 44146 Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. M MARKS Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Joshua M. Marks, Assistant Secretary (Typed or printed name and capacity of person signing application) 98 jp. Div - 03/01/2011 C. I. System Online



The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BEN VENUE LABORATORIES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTEENTH DAY OF SEPTEMBER, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

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

I SEP 14 AHID: 19



Jeffrey W. Bullock, Secretary of State AUTHENTICATION: 9024526

DATE: 09-13-11

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ify this certificate onl aware.gov/authver.shtml