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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : CORPORATION SERVICE COMPANY
Account Number : 120000000195
Phone : (850) 521-0821
Fax Number : (850) 558-1515

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

Email Address: _____

**FOREIGN PROFIT/NONPROFIT CORPORATION
NOVARTIS LATIN AMERICA SERVICES, INC.**

Certificate of Status	0
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**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. Novartis Latin America Services, 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. Delaware

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

3. 11-3487504

(FEI number, if applicable)

4. March 24, 1999

(Date of incorporation)

5. Perpetual

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

6. March 1, 2012

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. Waterford Business Park, 5200 Blue Lagoon Drive, Suite 650, Miami, Florida 33126

(Principal office address)

Waterford Business Park, 5200 Blue Lagoon Drive, Suite 650, Miami, Florida 33126

(Current mailing address)

8. Marketing and 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

Jacqueline N. Casper, Assistant VP

By: Jacqueline N. Casper

(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.

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

A. DIRECTORS

Chairman: Jeffrey GeorgeAddress: c/o Novartis International AG; Lichtstrasse 35, CH-4002, Basel SwitzerlandVice Chairman: Christopher SnookAddress: c/o Novartis International AG; Lichtstrasse 35, CH-4002, Basel SwitzerlandDirector: Harold KirschAddress: c/o Novartis International AG; Lichtstrasse 35, CH-4002, Basel Switzerland

Director: _____

Address: _____

B. OFFICERS

President: Oscar FerencziAddress: Waterford Business Park, 5200 Blue Lagoon Drive, Suite 650, Miami, Florida 33126Vice President: Freddy LepizAddress: Waterford Business Park, 5200 Blue Lagoon Drive, Suite 650, Miami, Florida 33126Secretary: Virginia LazalaAddress: Waterford Business Park, 5200 Blue Lagoon Drive, Suite 650, Miami, Florida 33126Treasurer: Franco ColomboAddress: Waterford Business Park, 5200 Blue Lagoon Drive, Suite 650, Miami, Florida 33126

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

13. _____

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.

14. Freddy Lepiz, Vice President and Chief Financial Officer

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

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TALLAHASSEE, FLORIDA

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NOVARTIS LATIN AMERICA SERVICES, 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 NINETEENTH DAY OF MARCH, A.D. 2012.

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.


AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NOVARTIS LATIN AMERICA SERVICES, INC." WAS INCORPORATED ON THE TWENTY-FOURTH DAY OF MARCH, A.D. 1999.

FILED
2012 MAR 20 AM 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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120327697




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 9441082

DATE: 03-19-12