

Division of Corporations
F120000003238
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Florida Department of 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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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

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
ABBVIE INC.

Certificate of Status	0
Certified Copy	0
Page Count	07
Estimated Charge	\$70.00

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MRL 8/7/12

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12 AUG -6 AM 9:18
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TALLAHASSEE, FLORIDA

RECEIVED
12 AUG -6 PM 4:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: AbbVie 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:

Autumn Anderson
Name of Person

Firm/Company

100 Abbott Park Road

Address

Abbott Park, IL 60064

City/State and Zip code

Autumn.anderson@abbott.com

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

For further information concerning this matter, please call:

Autumn Anderson at (847) 980-1026
Name of Person 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
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**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. AbbVie 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** **3. 32-0375147**
(State or country under the law of which it is incorporated) (FEI number, if applicable)
- 4. 04/10/2012** **5. Perpetual**
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Upon Qualification

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

- 7. 1 N. Waukegan Road, North Chicago, IL 60064**
(Principal office address)

same
(Current mailing address)

- 8.**
(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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(City) (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.

C T Corporation System

By: B. M.

(Registered agent's signature)

Bernadette McNamara

Assistant Secretary

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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TALLAHASSEE, FLORIDA

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

A. DIRECTORS SEE ATTACHMENT

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS SEE ATTACHMENT

President: _____

Address: _____

Vice President: AJ Shoultz

Address: 100 Abbott Park Road

Abbott Park, IL 60064

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. John A. Berry

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. John A. Berry, Asst. Secretary

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

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**Attachment to Florida
Officers & Directors**

- 1 **Full Name:** John Berry
 Officer/Director: Officer
 Officer's Title: Assistant Secretary
 Director's Title:
 Business Address: 100 Abbott Park Road
 City: Abbott Park
 State: IL
 ZIP Code: 60064
- 2 **Full Name:** Richard Gonzalez
 Officer/Director: Officer
 Officer's Title: Chairman of the Board and Chief Executive Officer

 Director's Title:
 Business Address: 100 Abbott Park Road
 City: Abbott Park
 State: IL
 ZIP Code: 60064
- 3 **Full Name:** Laura Schumacher
 Officer/Director: Officer
 Officer's Title: Executive Vice President, General Counsel and Secretary

 Director's Title:
 Business Address: 100 Abbott Park Road
 City: Abbott Park
 State: IL
 ZIP Code: 60064
- 4 **Full Name:** Valentine Yien
 Officer/Director: Officer
 Officer's Title: Vice President and Treasurer

 Director's Title:
 Business Address: 100 Abbott Park Road
 City: Abbott Park
 State: IL
 ZIP Code: 60064

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TALLAHASSEE, FLORIDA

5	Full Name:	Thomas Freyman
	Officer/Director:	Director
	Officer's Title:	
	Director's Title:	Director
	Business Address:	100 Abbott Park Road
	City:	Abbott Park
	State:	IL
	ZIP Code:	60064

Delaware

The First State

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PAGE 1
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ABBVIE 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 SIXTH DAY OF AUGUST, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ABBVIE INC." WAS INCORPORATED ON THE TENTH DAY OF APRIL, A.D. 2012.

5126809 8300

120907779

You may verify this certificate online
at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 9759797

DATE: 08-06-12