(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	·
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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	•	

Office Use Only



900242597409

12 DEC 18 BM II: OL

FILED 12 DEC 18 AM 8:31

114



ACCOUNT NO. : 12000000195

REFERENCE : 460156 7517345

AUTHORIZATION :

COST LIMIT : 5/8

ORDER DATE : December 14, 2012

ORDER TIME : 3:28 PM

ORDER NO. : 460156-005

CUSTOMER NO: 7517345

FOREIGN FILINGS

NAME: AVIIR, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kimberly Moret -- EXT# 52949

EXAMINER:

COVER LETTER

TO: New Filing S Division of C				
SUBJECT:	AVIIR, INC.			
	Name of co	rporation	- must include suffix	
Dear Sir or Madam:				·
"Certificate of Existe	eation by Foreign Corpor nce," or "Certificate of C eign corporation to transa	Good Stan	ding" and check are sub-	
Please return all corre	espondence concerning the	nis matter	to the following:	
KEN	HAMADA			
		Name of F	Person	
AVIII	R, INC.			
	F	irm/Com	pany	
9805	RESEARCH DRIVE			
		Addre	SS	
IRVI	NE, CA 92618	•		
		ty/State ar	nd Zip code	
REG	ULATORY@AVIIR.COM			
	=	be used f	or future annual report n	otification)
For further information	on concerning this matter	r, please c	ail:	
KEN HAMADA	at (949	398-6300	
Name of Per			Code & Daytime Telepho	one Number
New Filing S Division of C Clifton Build 2661 Executi Tallahassee,	Corporations ling ive Center Circle	·	MAILING AI New Filing Sec Division of Co P.O. Box 6327 Tallahassee, F	ction rporations
□ \$70.00 Filing Fee	\$78.75 Filing Fe		\$78.75 Filing Fee & Certified Copy	■ \$87.50 Filing Fee, Certificate of Status &

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.

AVIIR, INC.

(11 name unavana	ble in Florida, enter alternate corporate na	ame adopted for the purpose of transacting	business in Florida)
DELAWARE	:	3. 20-3606908	
(State or country)	inder the law of which it is incorporated)	(FEI number, if applie	able)
NOVEMBER 10, 2005 5.		5. "PERPETUAL"	
(Date	of incorporation)	(Duration: Year corp. will cease to e	xist or "perpetual")
NOT APPLICAT	BLE		
		ess in Florida, if prior to registration) 07.1502, F.S., to determine penalty liability)
9805 RESEARC	H DR., IRIVINE, CA 92618		
	(Principal office	address)	
9805 RESEARC	H DR., IRVINE, CA 92618		
	(Current mailing	address)	
	CTIVITY FOR WHICH CORPORATIONS		7
(Purpose(s)	of corporation authorized in home state o	or country to be carried out in state of Flori	
Name and stree	address of Florida registered agent:	(P.O. Box NOT acceptable)	1888 1888 1988 1988 1988 1988 1988 1988
Name:	CORPORATION SERVICE COMPANY	Y	18 M SEE, FLO
ffice Address:	1201 Hays Street	· .	STATE OR :
	Tallahassee	, Florida _32301	3
	(City)	(Zip code)	
	ent's acceptance:	ervice of process for the above stated	corresponding at the
	ed as registered agent and to accent s		

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.

Kimberly B. Moret, as its

agent

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

FILED

A DIRECTORS

Chairmon	DOUGLAS S. HARRINGTON, M.D.	12 DEC 18 AM 8:31
	COOL DECEMBER DELIVER OF COOLS	SECRETARY OF STATE
ddress: _		TALLAHASSEE, FLORIDA
ice Chairr	nan:	
Director: _		
Address: _		
_		
Director: _	,	
Address: _		
		
3. OFFIC	CERS	
resident:	DOUGLAS S. HARRINGTON, M.D.	
Address: _	9805 RESEARCH DRIVE, IRVINE, CA 92618	
Jice Preside	ent:	
Address: _		
_		
Secretary:	LAWRENCE COHN	
ddress: _9	805 RESEARCH DRIVE, IRVINE, CA 92618	
reasurer:		
Address:		
NOTE: If	necessary, you may attach an addendum to the application list	ing additional officers and/or directors.
The officer	Signature of Director or Office or director signing this document (and who is listed in number of that he or she is aware that false information submitted in a direct felony as provided for in s.817.155, F.S.	er 12 above) affirms that the facts stated herei locument to the Department of State constitut
	UGLAS S. HARRINGTON, M.D PRESIDENT AND CHIEF EXECUT	IVE OFFICER

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "AVIIR, 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 TWELFTH DAY OF DECEMBER, A.D. 2012.

PILEU

12 DEC 18 M 8 31

SECRETARY OF STATE

4031121 8300

121328997

Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 0059252

DATE: 12-12-12

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