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(Requestor's Name)			
(Address)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
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A. RAMSEY APR - 3 2023 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 438198 5042438

AUTHORIZATION :

COST LIMIT :

ORDER DATE: February 7, 2023

ORDER TIME : 8:37 AM

ORDER NO. : 438198-045

CUSTOMER NO: 5042438

FOREIGN FILINGS

NAME: KINDRED BIOSCIENCES, INC.

XX CORPORATE

____ LIMITED PARTNERSHIP

LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF STATUS

CONTACT PERSON: Alexxis Weiland-sorenson - EXT#

COVER LETTER

	nendment Section vision of Corporations	
SUBJEC'	Vindrad Dissoinness Inc	
SOMEC		(Name of Corporation)
DOCUM	ENT NUMBER:	
The enclo	sed withdrawal application and	fee are submitted for filing.
Please reti	urn all correspondence concerning	g this matter to the following:
-		(Name of Person)
_		(Firm/Company)
_		(Address)
	((City/State and Zip code)
For furthe	r information concerning this mat	ter, please call:
	(Name of Person)	at ()(Area Code & Daytime Telephone Number)
Enclosed i	s a check for the amount:	
□ \$35 Fil	ing Fee ☐ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certified Copy (Additional copy is Enclosed) □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
An Di P.(illing Address: nendment Section vision of Corporations D. Box 6327 Illahassee, FL 32314	Street Address: Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

Kindred Biosciences, Inc.

(Name of Corporatio	on)
F13000004225	
(Document Number of Corporation	on (if known)
Delaware 09/30/2013	
(incorporated Under Laws of and date authorized to tran	nsact business/conduct its affairs)
This corporation is no longer transacting business or conducting voluntarily surrenders its authority to transact business or conducting	g affairs within the State of Florida and hereby ct affairs in Florida.
This corporation revokes the authority of its registered agent appoints the Department of State as its agent for service of proce time it was authorized to transact business or conduct affairs in F	ess based on a cause of action arising during the
The following is a current mailing address for the corporation:	
c/o Elanco US Inc., 2500 Innovation Way	
(Mailing Address)	
Greenfield, IN 46140	
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the fine of Signature of a director, president of other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	Suture of any change in its mailing address. 3-22-23 (Date)
David Pugh	Treasurer
(Typed or printed name of person signing)	(Title of person signing)