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(Requestor's Name)					
(Address)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
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SECRETARY OF STATU

n e x g e n pharma®

April 18, 2014

Florida Department of State Amendment Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re:

Correction of Registration for Nexgen Pharma, Inc.

Document No. P11000037117

Ladies/Gentlemen:

The above referenced entity was registered in Florida on April 15, 2011. Unfortunately, an error was made on our application. We are actually a California corporation and should have registered as a foreign corporation in Florida. Per instructions from your office, enclosed please find our Articles of Dissolution, Application by Foreign Corporation for Authorization to Transact Business in Florida, Certificate of Status from the California Secretary of State, and our check #165302 in the amount of \$105.00. Please correct our registration.

Please don't hesitate to contact me if you need anything further to process this request. Thank you for your time and attention to this matter.

Sincerely,

Patricia Masters Corporate Paralegal

Direct: (949) 399-4091

patriciamasters@nexgenpharma.com

Enclosures

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.

(Buter name of cor	Pharma, Inc. poration; must include "INCORPORATE p," "Inc," "Co," or "Corp.")	3 D,'	"COMPANY," "CORPORATION,"		
(If name unavailab	le in Florida, enter alternate corporate na	ine	adopted for the purpose of transacting business in Florida)	-	
2. California		4	94-0494000		
	nder the law of which it is incorporated)	_ ~.	(FBI number, if applicable)		
, 12/31/1935		5	Perpetual		
(Date of incorporation)			(Duration: Year corp. will cease to exist or "perpetual")		
2011 - erron	eously registered as a Florida	CO	rporation - see document # P1100003711	7	
	(Date first transacted busine (SEE SECTIONS 607.1501 & 60	ess i 07.1	n Florida, if prior to registration) 502, F.S., to determine penalty liability)	_	
7. 46 Corpora	ate Park, Suite 100, Irvi			me	
	(Principal office				
46 Corpora	ate Park, Suite 100, Irvin			_	
8. All lawful (Purpose(s)		or c	Dumtry to be carried out in state of Florida)		
9. Name and street	address of Florida registered agent:	(P.	O. Box NOT acceptable)		
Name:	Robert Norman		· ALEC	7	
Office Address:	97 Rose Bay Court		ARE IA	APR 23 AHI	-
	Royal Palm Beach		Florida 33411 · S	تر)	!
	(City)		(Zip code)	7	1
designated in this further agree to co	ed as registered agent and to accept application, I hereby accept the app	olni ites	vice of process for the above stated corporation at t tment as registered agent and agree to act in this co relative to the proper and complete performance o of my position as registered agent.	he pl ac Pacity.	
	(Registered ager	#'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.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: Vice Chairman: ___ Address: Director: _ Address: ___ Director: __ Address: **B. OFFICERS** President: Steven R. Brown Address: 46 Corporate Park, Suite 100, Irvine, CA 92606 Vice President: Secretary: Mark T. Nishi Address: 46 Corporate Park, Suite 100, Irvine, CA 92606 Treasurer: _ Address: NOTE: If necessary, you any attach an addendurato the application listing additional officers and/or directors. 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 \$.817.155, F.S. Mark T. Nishi, Secretary & CFO

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

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

NEXGEN PHARMA, INC.

FILE NUMBER:

C0165231

FORMATION DATE:

12/31/1935

 $\mathtt{TYPE}:$

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of March 18, 2014.

DEBRA BOWEN
Secretary of State