

F1400000 2548

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

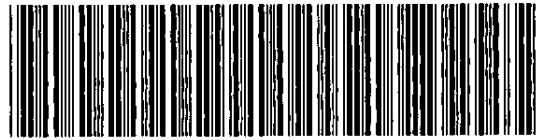
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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RECEIVED
DEPARTMENT OF STATE
CORPORATION DIVISION
2014 JUN 13 PM 4:24
NOT FOR PUBLIC RELEASE
10/14/2013
SUFFICIENT FILING

FILED
14 JUN 13 AM 8:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

h 06/16/14



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 173923 7716899

AUTHORIZATION :

[Handwritten signature]

COST LIMIT : \$ 87.50

ORDER DATE : June 11, 2014

ORDER TIME : 8:43 AM

ORDER NO. : 173923-005

CUSTOMER NO: 7716899

FOREIGN FILINGS

NAME: FERRING PHARMACEUTICALS INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- XX CERTIFIED COPY
- PLAIN STAMPED COPY
- XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Gray -- EXT# 62925

EXAMINER: _____

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Ferring Pharmaceuticals 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:

Judy Botek

Name of Person

Ferring Pharmaceuticals Inc.

Firm/Company

100 Interpace Parkway

Address

Parsippany, New Jersey 07054

City/State and Zip code

judy.botek@ferring.com

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

For further information concerning this matter, please call:

Judy Botek

Name of Person

at (973) 796-1638

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. Ferring Pharmaceuticals 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. 54-1179881
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. October 2, 1980 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 100 Interpace Parkway, Parsippany, NJ 07054
(Principal office address)

same as above
(Current mailing address)

8. Pharmaceutical
(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, Florida 32301
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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

By: _____
(Registered agent's signature)

Harry B. Davis
Asst. Vice President

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: Michel Pettigrew
Address: Ferring International Center SA
Chemin de la Vergognausaz 50 St. Prex 1162 Switzerland

Vice Chairman: _____
Address: _____

Director: Peter Wilden
Address: Ferring International Center SA
Chemin de la Vergognausaz 50 St. Prex 1162 Switzerland

Director: Paul Komer
Address: 100 Interpace Parkway
Parsippany, NJ 07054

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TALLAHASSEE, FLORIDA

B. OFFICERS

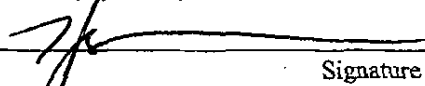
President: Aaron Graff
Address: 100 Interpace Parkway
Parsippany, NJ 07054

Vice President: _____
Address: _____

Secretary: Howard Dorfman
Address: 100 Interpace Parkway, Parsippany, NJ 07054

Treasurer: Lalit Ahluwalia
Address: 100 Interpace Parkway, Parsippany, NJ 07054

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. Howard Dorfman General Counsel and Corporate Secretary
(Typed or printed name and capacity of person signing application)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FERRING PHARMACEUTICALS 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 THIRTEENTH DAY OF JUNE, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FERRING PHARMACEUTICALS INC." WAS INCORPORATED ON THE SECOND DAY OF OCTOBER, A.D. 1980.

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.

FILED
14 JUN 13 AM 8:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

0900395 8300

140836134




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1451603

DATE: 06-13-14