

To:

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2023-05-10 06:57 PM PDT

195182735

From: Kaitly Toon

5/10/23, 9:49 AM

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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MAY 10 2023

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COR AMND/RESTATE/CORRECT OR O/D RESIGN
KEMPHARM, INC.

Certificate of Status	0
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Page Count	04
Estimated Charge	\$43.75

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PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

F14000003826
(Document number of corporation (if known))

1. KemPharm, Inc.
(Name of corporation as it appears on the records of the Department of State)
2. Delaware 3. December 2, 2015
(Incorporated under laws of) (Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? February 21, 2023

5. Zevra Therapeutics, Inc.
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

(Florida street address)

New Registered Office Address, Florida
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position

Signature of New Registered Agent, if changing

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STATE OF FLORIDA
TALLAHASSEE, FL

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Q If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
President, CEO and Director	Fravis C. Mickle, PhD	1180 Celebration Blvd., Suite 103, Celebration, FL 34747	Add
			☒ remove
			Add
			☐ remove
			Add
			☐ remove
			Add
			☐ remove
			Add
			☐ remove
			Add
			☐ remove

10) Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

DocuSigned by:
R. LaDuane Clifton

(Signature of a director, president or other officer - if in the hands of
a receiver or other court appointed fiduciary, by that fiduciary)

R. LaDuane Clifton

(Typed or printed name of person signing)

Chief Financial Officer

(Title of person signing)

FILING FEE \$35.00

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THAT THE SAID "KEMPHARM, INC.",
FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "ZEVRA
THERAPEUTICS, INC." ON THE TWENTY-FIRST DAY OF FEBRUARY, A.D.
2023, AT 12:44 O'CLOCK P.M.



5519003 8320
SR# 20231710152

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 203242204
Date: 04-28-23