F14000005304

(Requestor's Name)				
(Address)				
(Address)				
(Ci	ty/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(В	usiness Entity Nam	e)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



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14 DEC 16 AM 8: 2 SECHETARY OF STATE TALLAHASSEE FLORIE

APPROVE 1/H

ACCOUNT NO. : I2000000195				
REFERENCE : 421571 7181740				
AUTHORIZATION: Spulle man				
COST LIMIT : \$ 720.00				
ORDER DATE: December 15, 2014				
ORDER TIME : 3:52 PM				
ORDER NO. : 421571-005				
CUSTOMER NO: 7181740				
FOREIGN FILINGS				
NAME: KERYX BIOPHARMACEUTICALS, INC.				
XXXX QUALIFICATION (TYPE: CO)				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING				
CONTACT PERSON: Emily Gray EXT# 62925				
EXAMINER:				

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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Keryx Biopharmaceuticals, inc.	
	poration - must include suffix
Dear Sir or Madam:	
	tion for Authorization to Transact Business in Florida," bod Standing" and check are submitted to register the t business in Florida.
Please return all correspondence concerning th	s matter to the following:
Bill Hopkins	
7	ame of Person
Keryx Biopharmaceuticals, Inc.	
Fi	rm/Company
750 Lexington Avenue - 20th Floor	
	Address
New York, NY 10022	
·	/State and Zip code
BILL. HOPKINS OKERYX. COM	
E-mail address: (to b	e used for future annual report notification)
For further information concerning this matter,	please call:
Bill Hopkins at (2	12 584-5752
Name of Person	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 S78.75 Filing Fee Certificate of State	



APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA 14 UEC 16 AM 8: 22

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBJECTED OF STATE REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDAL AHASSEE, FLORIDA

Keryx Biophan	maceuticals, Inc.		
(Enter name of c	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	O," "COMPANY," "CORPORATION,"	
(If name unavail	able in Florida, enter alternate corporate nam	ne adopted for the purpose of transacting business in Florida)	
		13-4087132	
	y under the law of which it is incorporated)	(FEI number, if applicable)	
10/22/1998	4	Perpetual	
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	
6. 10/1/2013			
		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	
750 Lexington A	venue - 20th Floor, New York, NY 10022	2	
	(Principal office ad	ldress)	
750 Lexington /	venue - 20th Floor, New York, NY 1002	2	
	(Current mailing ad	idress)	
8. Name and stree	et address of Florida registered agent: (P	O. Box NOT acceptable)	
Name:	Corporation Service Company		
Office Address:	1201 Hays Street		
	Tallahassee	32301	
	(City)	, Florida (Zip code)	
designated in this further agree to c	ed as registered agent and to accept ser application, I hereby accept the appoin	vice of process for the above stated corporation at the place tment as registered agent and agree to act in this capacity. It relative to the proper and complete performance of my	
ı	Corporation Service Company	Emily Gray	
В	y: Emily Lyan	Anat View B 11	
	iy: Emily Lycony (Registered ageny)	signature)	
10. Attached is a o	certificate of existence duly authenticated	d, 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.



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

14 DEC 16 AM 8: 22

A. DIRECTORS	OPODETIES
Chairman: See Attachment A	SECRETARY OF STATE TALLAHASSEE FLORIDA
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director;	
Address:	
B. OFFICERS	
See Attachment A President:	
Address:	
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing add	
12. Signature of Director or Officer	
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 ab are true and that he or she is aware that false information submitted in a docume a third degree felony as provided for in s.817.155, F.S.	ove) affirms that the facts stated herein
13. James F. Oliviero, V.P., Chief Financial Officer	
(Typed or printed name and capacity of person signing a	application)

APPROVEL AND FILED

14 DEC 16 AM 8: 22

SECRETARY OF STATE TALLAHASSEE FLORIDA

Attachment A

Corporate Officer and Director Information

Keryx Biopharmaceuticals, Inc. 750 Lexington Avenue, 20th Floor New York, NY 10022

Officers:

Ron Bentsur Chief Executive Officer

James F. Oliviero Chief Financial Officer

Greg Madison *Chief Operating Officer*

Directors:

Michael P. Tarnok Jack Kaye Kevin J. Cameron Wyche Fowler, Jr. Joseph Feczko, M.D. Daniel P. Regan Ron Bentsur

^{*}All corporate officers and directors may be contacted at the address provided above.



The First State

SECRETARY OF STATE TALLAHASSEE, FLORIDA

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "KERYX BIOPHARMACEUTICALS, 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 FIFTEENTH DAY OF DECEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "KERYX BIOPHARMACEUTICALS, INC." WAS INCORPORATED ON THE TWENTY-SECOND DAY OF OCTOBER, A.D. 1998.

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.

2958400 8300

141538483

Jeffrey W. Bullock, Secretary of State AUTHENTYCATION: 1959031

DATE: 12-15-14

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