

**Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6381

RE-SUBMIT

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
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Fax Number : (850) 878-5368

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FOREIGN PROFIT/NONPROFIT CORPORATION

Cubist Pharmaceuticals, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	05/6
Estimated Charge	\$70.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 FEB 23 AM 11:24

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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February 24, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: CUBIST PHARMACEUTICALS, INC.
REF: W15000013083

RE-SUBMIT

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We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The first page is not legible.

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Valerie Herring
Regulatory Specialist II
New Filing Section

FAX Aud. #: H15000046173
Letter Number: 215A00003785

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15 FEB 23 AM 11:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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. Cubist Pharmaceuticals, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

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

2. Delaware 3. 22-3192085
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. May 1, 1992 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. N/A

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

7. 65 Hayden Avenue, Lexington, MA 02421
(Principal office address)
65 Hayden Avenue, Lexington, MA 02421
(Current mailing address)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CT Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(City) (Zip code)

9. 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.

CT Corporation System
By: Candice Pignataro Candice Pignataro
(Registered agent's signature) Assistant Secretary

10. 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.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Please see attached.

Address:

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

B. OFFICERS

President: Please see attached.

Address:

Vice President:

Address:

Secretary:

Address:

Treasurer:

Address:

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12.  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.

13. Katie Fedosz, Assistant Secretary

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

2/26/2015 15:20:58 From: To: 8506176381

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Cubist Pharmaceuticals, Inc.
EIN - 22-3192085

Directors

John Mustillo - 2000 Galloping Hill Road, Kenilworth, NJ 07033
Sunil Patel - 2000 Galloping Hill Road, Kenilworth, NJ 07033

Officers

Robert Davis - Chief Executive Officer
2000 Galloping Hill Road, Kenilworth, NJ 07033

Bruce Kuhlík - Vice President
2000 Galloping Hill Road, Kenilworth, NJ 07033

Sunil Patel - Vice President
2000 Galloping Hill Road, Kenilworth, NJ 07033

Mark McDonough - Senior Vice President and Treasurer
2000 Galloping Hill Road, Kenilworth, NJ 07033

Juanita Lee - Assistant Treasurer
2000 Galloping Hill Road, Kenilworth, NJ 07033

Joseph Promo - Assistant Treasurer
2000 Galloping Hill Road, Kenilworth, NJ 07033

Mark Simon - Assistant Treasurer
2000 Galloping Hill Road, Kenilworth, NJ 07033

Jon Filderman - Secretary
2000 Galloping Hill Road, Kenilworth, NJ 07033

Katie Fedosz - Assistant Secretary
2000 Galloping Hill Road, Kenilworth, NJ 07033

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Delaware

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CUBIST 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 TWENTY-THIRD DAY OF FEBRUARY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

2296420 8300

150238266

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 2139919

DATE: 02-23-15