# F15000003496

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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SECRETARY OF STATE
AHASSSEE, FLORID.

AUG 1 0 2015 T. HAMPTON

#### **COVER LETTER**

TO:	New Fili	_	ction rporations				
SUBJ	ЕСТ:		rican Skin Assoc	iation Inc			
о <b>съ</b>	LC1	Airie	Name of	Corporation	on – must ii	nclude suffix	
Dear S	Sir or Madar	n:					
Affairs	s in Florida'	, "Cer		nce", or "C	Certificate o	f Status" and c	zation to Conduct its check are submitted to n Florida.
Please	return all co	orresp	ondence concern	ing this ma	itter to the f	ollowing:	
	H	Kathlee	n Reichert				
				Name o	f Person		
		Americ	an Skin Associatio	n			
					ompany	····	
	6	East 4	3rd Street, 28th Flo				
				Ado	lress		
	N	ew Yor	k, NY 10017				
			C	ity/State a	nd Zip Cod	e	
	к	athleer	n@americanskin.or	a			
			ail address: (to be		uture annua	al report notific	cation)
For fur	ther inform	ation o	concerning this m	natter, pleas	se call:		
Kath	nleen Reicher	t		at (	212 y	889-4858	
	Ŋ.	ame of	Person		Area Code	& Daytime T	elephone Number
	MAILING New Filing					STREET/C	OURIER ADDRESS: Section
Division of Corporations			Division of Corporations Clifton Building				
P.O. Box 6327 Tallahassee, FL 32314			2661 Executive Center Circle Tallahassee, FL 32301				
Enclos	ed is a chec	k for t	he following amo	ount:			
<b>□ \$</b> 70	0.00 Filing F	ee	□\$78.75 Filing Certificate of			Filing Fee & ed Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy



## American Skin Association

August 6, 2015

New Filing Section
Division of Corporations
Florida Department of State
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Florida Registration

To Whom It May Concern:

I am writing to submit American Skin Association Inc.'s (ASA) registration form and requested materials to the New Filing Section at the Division of Corporations in the Florida Department of State.

Enclosed, you will find ASA's registration form, Certificate of Existence duly authenticated by the State of New York Department of State, and Check #0115 in the amount of \$87.50 to cover the filing fee, certificate of status, and certified copy.

If you have any questions, or if I can provide you with any additional information, please do not hesitate to contact me by phone at (212) 889-4858 or by e-mail at <a href="mailto:kathleen@americanskin.org">kathleen@americanskin.org</a>.

Kind Regards,

Kathleen Reichert

**Executive Vice President** 

Karble Rillent

Enclosures

### APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1.		Skin Association, Inc.						
i	(Name of corpor import in langua in the name at pr	ation: must include the word "IN ge as will clearly indicate that it esent. "Company" or "Co." may	NCORPORATE is a corporation not be used as a	D" or "CORP instead of a r a corporate su	ORATION" natural person offix by a non	or words or abbr or partnership it profit corporation	eviations of like f not so contained n.)	
2.	New York, Un	ited States	3.	13-3401320				
~.	(State or coun	try under the law of which it is i	,	13-3401320	(FEI numbe	r, if applicable)		
4.	May 1987		5.	Perpetual			_	
•••	(D	rate of Incorporation)		(Duration: `	Year corp. wi	Il cease to exist o	or "perpetual")	
6.	N/A							
٠.	(Date first condu	eted affairs in Florida if prior to r	egistration. See s	ections 617.1.	501 & 617.15	02, F.S. to detern	tine penalty liability.)	
7	6 East 43rd St	treet, 28th Floor, New York, NY	10017	•				
١.			(Principal of	fice address)		<del> </del>		
	6 East 43rd St	reet, 28th Floor, New York, NY 1	0017					•
			(Current m	ailing address	<u>s)</u>			
9.	related science (Purpose(s) of contract Name and streems) Name:	sion in Florida to advance researces and disciplines. orporation authorized in home street address of Florida register.  DANIEL P. POLICASTRO  355 W. Venice Ave.	tate or country to	o be carried o	out in the state	•	15 AUG - 7 SECRETAR TALLAHASS	logy and
	_	Venice		_, Florida _	34285	5	FFS	コ
		(City)				(Zip Code)	:31 ORIO	
He de fu	aving been nar esignated in thi erther agree to	agent's acceptance: med as registered agent and is application, I hereby accep comply with the provisions a familiar with and accept the	of the appoints of all statutes in obligations o	ment as regi relative to th f my positio	istered agent te proper an n as registe	t and agree to d d complete per	ooration at the place act in this capacity. I	
			(Registered as	gent's signatu	re)			

jurisdiction under the law of which it is incorporated.

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

12. Names and addresses of officers and/or directors

#### A. DIRECTORS

Chairman	n: Howard P. Milstein	<del></del>	
Address:_	Emigrant Savings Bank, 6 East 43rd Street, New York, NY 10017		
Vice Cha	irman: Humberto C. Antunes		
Address:_	Galderma S.A., Avenue Gratta-Paille 2, CH-1018 Lausanne, Switzerland		
Director:	Donald G. Calder		
Address:	Clear Harbor Asset Management, 420 Lexington Avenue, #2006, New York, NY 10170		
Director:	Nora M. Jordan		
Address:_	Davis Polk & Wardwell, LLP, 450 Lexington Avenue, New York, NY 10017	SECKE	5 <u>#</u>
B. OFF	FICERS	NSSEC.E	
President	: Philip G. Prioleau, MD	<u>S</u>	<u></u> \
Address:_	Prioleau & McGuire Dermatology, 1035 5th Avenue, New York, NY 10028	AUD A	<u>=</u>
Vice Pres	sident: David R. Bickers, MD		
Address:_	Columbia University, Department of Dermatology, 161 Fort Washington Avenue, New York, NY 10	032	
- Secretary:	Denise Kellen		
Address:_	320 East 72nd Street, New York, NY 10021		
Treasurer	David J. Lyons		
Address:_	400 Delay Hill Delay Contab Divisor NJ 07076		
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and	l/or director	·s.
13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the applic	ation)	<del>_</del>
14	David Lyans, Treasurer (Typed or dripted name and canacity of person signing application)		

## State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of AMERICAN SKIN ASSOCIATION, INC. was filed on 01/09/1987, under the name of THE NEW YORK SOCIETY FOR THE ADVANCEMENT OF CUTANEOUS BIOLOGY AND MEDICINE, INC., as a Not-for-Profit Corporation and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

A Certificate of Amendment THE NEW YORK SOCIETY FOR THE ADVANCEMENT OF CUTANEOUS BIOLOGY AND MEDICINE, INC., changing its name to THE SOCIETY FOR CUTANEOUS BIOLOGY AND MEDICINE, INC., was filed 10/25/1988.

A Certificate of Amendment THE SOCIETY FOR CUTANEOUS BIOLOGY AND MEDICINE, INC., changing its name to THE SKIN DISEASE SOCIETY, INC., was filed 04/10/1990.

A Certificate of Amendment THE SKIN DISEASE SOCIETY, INC., changing its name to AMERICAN SKIN ASSOCIATION, INC., was filed 09/08/1992.

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WITNESS my hand and the official seal of the Department of State at the City of Albany, this 23rd day of July two thousand and fifteen.

Counting Scientificant State State State