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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

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Account Number : FCA000000023 Phone : (850) 205~8842

Fax Number : (850)878~5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address pleases

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FOREIGN PROFIT/NONPROFIT CORPORATION

AMAG Pharmaceuticals, Inc.

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COVER LETTER

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SUBJECT:	AMAG Phart	naceuticals, Inc.							
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Please return	ali correspon	dence concerni	ng this matte	r to the	following:				
		Pamela	Richardson ~	Legal	Department				
			Name of	Persor	l .				
		AM	AG Phormace	uticals,	lne.				
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For further in	nformation cor	cerning this m	atter, please	call:			-	2	
Pamela Richar	rdson		at (49	9-2881 -				
Nam	ne of Person		Area Coo	le	Daytime Telep	hone Numbe	ı		
Regis Divis Clifte 2661	EET/COURI stration Section sion of Corpor on Building Executive Ce thassee, FL 32	ations nier Circle	S:		MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7			
Enclosed is a	check for the	following amo	ount:						
□ \$70.00 Fi	ling Fee 🛭	578.75 Filing Certificate o			75 Filing Fee & ified Copy			Status &	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1303, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Enter name of co	AMAG Pharmaceut "TOCORPORATED,"	·	n		
inc.," "Co.," "Co	orp," "Inc," "Co," or "Corp.")	conditati, condition,			
M/A					
MA	ble in Florida, enter alternate corporate name ac	lasted for the propose of transcript	husines in Elecida)		
	ole in Plottos, enter alternate corporate name ac Delaware	topied for the purpose of transacting 04-2742593	(Dustriess III Flotius)		
(State or country under the law of which it is incorporat		7			
		5. perpetual			
(Date of incorporation)		5. (Date of duration, if other than perpetual)			
,	•	•	• • •		
	Date first transacted business in	Lo Florida, if prior to registration)			
	(SEE SECTIONS 607.1501 & 607.150	2, F.S., to determine penalty liabilit	у)		
	1100 Winter St. V	Valthem, MA 02451	, , , , , , , , , , , , , , , , , , ,		
	(Principa	office address)	•		
	(Current mailing	address, if different)	2015 SEC		
Nama and at	t address of Florida registered agent: (P.O	Day NOT assessables	SEP AHA		
Amue win <u>20e</u>	C T Corporation System	. Box (ACT acceptable)	ASS -		
Name:	C 1 Curporation System		開発し		
ice Address:	1200 South Pine Island Road		منا الساب		
	Plantation, FL 33324	, Florida	무건 그		
	(City)	(Zip code)	32 22		
dng been nam Ignoted in this Ther agree to c	ent's acceptance: sed as registered agent and to accept service application, I hereby accept the appointm omply with the provisions of all statutes re amiliar with and accept the obligations of C T Corporation Sy	ent as registered agent and agr clative to the proper and comple my position as registered agent stem	ee to act in this capa te performance of m		
By:	Comin Bruya- (Registered a	Conal	<u>s D</u> ayon		
47.			<u> </u>		

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:	
A. DIRECTORS	
Chairman: See Attachment A	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director.	
Address:	
D 00770700	
R TANKIE KAY	П
President: See Attachment &	
Address	T
Vice Provident	
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 11 above) affirms that the facts stated he	rein
are true and that he or she is aware that false information submitted in a document to the Department of State const	itutes
a third degree felony as provided for in s.817.155, F.S.	
13. To see 1. U. ++: q !: e (Typed or printed name and capacity of person signing application)	

9/11/2015 11:13:47 AM From: To: 8506176383(5/7)

Attachment A

Corporation information

AMAG Pharmaceuticals, inc. 1100 Winter Street, Waltham, MA 02451

AMAG Pharmaceuticals, Inc. is a publicly traded company

Directors:

Gino Santini, Chairman

William K. Helden

Barbara Deptula

Dr. Lesley Russell

Davey Scoon

John A, Fallon M.D.

James Sulat

SECRETARY OF STATE

Attachment B

Corporation information

AMAG Pharmaceuticals, Inc. 1100 Winter Street, Waltham, MA 02451

AMAG Pharmaceuticals, Inc. is a publicly traded company

Officers:

William K. Helden* Chief Executive Officer

Frank E. Thomas*

President, Chief Operating Officer

Joseph Vittiglio* Senior VP of Legal Affairs, General Counsel and Secretary

Geoffrey Crouse*
Executive Vice President

Julie Krop, M.D.*

Chief Medical Officer and Senior Vice President, Clinical Development and Regulatory Affairs

Kenneth Wilson Senior Vice President of Soles and Marketing, Lumara Health Division SECRETARY OF STATE

^{*} indicates the top five corporate officers

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "AMAG 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 NINTH DAY OF SEPTEMBER, 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.

926007 8300
SR# 20150060106
You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 10025295

Date: 09-10-15