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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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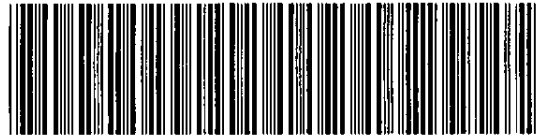
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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16 APR 14 AM 9:28

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DEPARTMENT OF
16 APR 14 AM 11:23

APR 15 2016

Y SULKER

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 102467 5163956

AUTHORIZATION :

COST LIMIT : \$ 87.50

ORDER DATE : April 13, 2016

ORDER TIME : 9:50 AM

ORDER NO. : 102467-005

CUSTOMER NO: 5163956

FOREIGN FILINGS

NAME: ARALEZ PHARMACEUTICALS US INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Aralez Pharmaceuticals US Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Alan D. Sokaler

Name of Person

Aralez Pharmaceuticals US Inc.

Firm/Company

2001 Route 46, Suite 310

Address

Parsippany, NJ 07054-1315

City/State and Zip code

asokaler@aralez.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alan D. Sokaler

973

402-4296

Name of Person

at ()

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**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.*

Aralez Pharmaceuticals US Inc.

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

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

2. Delaware 3. 47-4626948
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 07/24/2015 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 2001 Route 46, Suite 310, Parsippany, NJ 07054-1315
(Principal office address)

(Current mailing address, if different)

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(City) (Zip code)

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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.

Corporation Service Company
By: M. Zender
(Registered agent's signature)

Melissa Zender
Asst. Vice President

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.

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

A. DIRECTORS

Chairman: Andrew Koven
Address: 2001 Route 46, Suite 310, Parsippany, NJ 07054-1315

Vice Chairman: _____
Address: _____

Director: Eric Trachtenberg
Address: 2001 Route 46, Suite 310, Parsippany, NJ 07054-1315

Director: Scott Charles
Address: 2001 Route 46, Suite 310, Parsippany, NJ 07054-1315

B. OFFICERS

President: Andrew Koven
Address: 2001 Route 46, Suite 310, Parsippany, NJ 07054-1315

Vice President: _____
Address: _____

Secretary: Eric Trachtenberg
Address: 2001 Route 46, Suite 310, Parsippany, NJ 07054-1315

Treasurer: Scott Charles
Address: 2001 Route 46, Suite 310, Parsippany, NJ 07054-1315

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

12. Alan Sokaler, Assistant Treasurer, 2001 Route 46, Suite 310, Parsippany, NJ 07054-1315

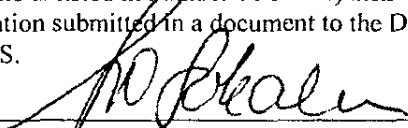
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated 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. Alan Sokaler, Assistant Treasurer

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

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 4-7-2016

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ARALEZ PHARMACEUTICALS US 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 THIRTEENTH DAY OF APRIL, A.D. 2016.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ARALEZ PHARMACEUTICALS US INC." WAS INCORPORATED ON THE TWENTY-FOURTH DAY OF JULY, A.D. 2015.

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




Jeffrey W. Bullock, Secretary of State

5791066 8300

SR# 20162276389

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

Authentication: 202142501

Date: 04-13-16