

F160000002160

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

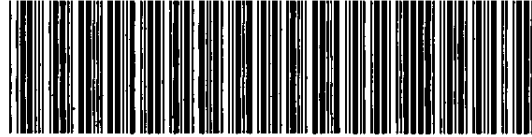
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/02/16--01032--006 **70.00

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2016 MAY -2 AM 10:51
SECRETARY OF STATE
TALLAHASSEE FLORIDA

John *5/11*



Providing a Solid Dose of Innovation®

April 18, 2016

Florida Department of State
Registration Section - Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Attachment to Registration Application

We are submitting this application at the request of the Department of Business and Professional Regulations.

We are a New York drug manufacturer that ships RX and OTC drug products to our customers (wholesalers/distributors) located in Florida. In 2015 we submitted a change in ownership application to the Department of Business and Professional Regulations; who has recently stated they will not approve our application until we are registered with the Department of State Division of Corporations.

Your statute 607.1501, had previously been reviewed by Time-Cap Laboratories and it was determined that we were not required to apply for a certificate of authority. "The following activities, among others, do not constitute transacting business within the meaning of subsection (1): (i) Transacting business in interstate commerce."

Our records indicate that the Department of Business and Professional Regulations issued a permit (23:00059) to Time-Cap Laboratories on December 20, 2002; earlier records are no longer available. The exact date that Time-Cap Laboratories first shipped product to our customers in Florida could not be determined.

If you need any further information, please do not hesitate to contact me directly at 631-753-9090 extension 159.

Thank you in advance for your time and attention to our license renewal application.

Sincerely,

A handwritten signature in cursive script that reads 'Joanne Whelan'.

Joanne Whelan,
Regulatory Affairs Associate

Joanne Whelan

From: Burnett, Rebecca <Rebecca.Burnett@myfloridalicense.com>
Sent: Monday, April 18, 2016 9:55 AM
To: Joanne Whelan
Subject: Florida Non-Resident Prescription Drug Manufacturer Application

Good Morning Ms. Whelan,

I have reviewed the email submitted on April 13, 2016 regarding registering your company with the Florida Department of State, Division of Corporation. As a follow up to Mary Grayson's email and October 26, 2015 letter, your company must be registered with Florida Department of State Division of Corporation. You may visit their website at www.sunbiz.org for registration instructions and contact information.

Please give me a call at 850-717-1801 if you have any questions.

Rebecca

Rebecca J. Burnett
Regulatory Supervisor/Consultant
Division of Drug, Devices & Cosmetics
1940 North Monroe Street, Suite 26-A
Tallahassee, Florida 32399-1047
(850)717-1801
License Efficiently, Regulate Fairly

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Time-Cap Laboratories, 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:

Joanne Whelan

Name of Person

Time-Cap Laboratories, Inc.

Firm/Company

7 Michael Avenue

Address

Farmingdale, New York 11735

City/State and Zip code

jwhelan@timecaplabs.com

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

For further information concerning this matter, please call:

Joanne Whelan

631

753-9090

at (_____) _____

Name of Person

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.*

- Time-Cap Laboratories, 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. New York 3. 11-2510086
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 10/15/1979 5. perpetual
(Date of incorporation) (Date of duration, if other than perpetual)
6. see attached
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 7 Michael Avenue, Farmingdale, NY 11735
(Principal office address)
- _____
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: Registered Agent Solutions, Inc.
- Office Address: 155 Office Plaza Drive, Suite A
- Tallahassee, Florida 32301
(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.



Adam Saldana, Asst. Secretary
(Registered agent's signature)

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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TALLAHASSEE FLORIDA

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2018 MAY -2 AM 10:51
SECRETARY OF STATE
TALLAHASSEE

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

A. DIRECTORS

Chairman: N/A
Address: _____

Vice Chairman: N/A
Address: _____

Director: N/A
Address: _____

Director: N/A
Address: _____

B. OFFICERS

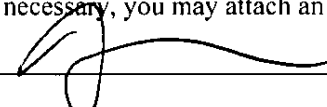
President: Chief Operating Officer: Robert Azzara
Address: 7 Michael Avenue, Farmingdale, NY 11735

Vice President: N/A
Address: _____

Secretary: N/A
Address: _____

Treasurer: N/A
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 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. Robert Azzara, Chief Operating Officer
(Typed or printed name and capacity of person signing application)

State of New York
Department of State } ss:

I hereby certify, that the Certificate of Incorporation of TIME-CAP LABORATORIES, INC. was filed on 10/15/1979, with perpetual duration, 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.



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STATE DEPT OF STATE
TALLAHASSEE FLORIDA

*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 20th day of April two
thousand and sixteen.*

Anthony Giardina

Executive Deputy Secretary of State