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Note: DO NOT hit the REFRESH/RELOAD bufton on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM Account Number : FCA00000023

Phone Fax Number

: (850) 205-8842 : (850)878-5368

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

Email Address:

## FOREIGN PROFIT/NONPROFIT CORPORATION

Noramco, Inc.

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## **COVER LETTER**

	Registration Section Division of Corporations				
SUBJEC	T: Noramco, Inc.				
		ne of corporation	- must include suffix		
Dear Sir o	r Madam:				
"Certificat	sed "Application by Foreign e of Existence," or "Certific renced foreign corporation	cate of Good Stand	ding" and check are sub-		
Please retu	ırn all correspondence conc	erning this matter	to the following:		
Michae	el Levitt				
		Name of F	'erson		
Noram	co. Inc.				
		Firm/Com	pany		
500 Sw	edes Landing Road			letter mer ver en	
		Addre	65		
Wilmir	igton, DE				
		City/State ar	d Zip code		
<u>nılevit</u>	@its.jnj.com	ress (to be used f	or future annual report n	otification)	
		·	•	office and the second	
For further	r information concerning th	is matter, please c	all:		
Micha	el Levitt	at ( <u>302</u>	) 888-4485		
	ame of Person	Area Code		10ne Number	
Re Di CI 26	TREET/COURIER ADDR egistration Section vision of Corporations litton Building 61 Executive Center Circle allahassee, FL 32301		MAILING AI Registration So Division of Co P.O. Box 6327 Tallahassee, F	ection reporations	
Enclosed i	s a check for the following	amount:			
<b>\$70.00</b>	Filing Fee	iling Fee &  ate of Status	\$78.75 Filing Fee & Certified Copy	S87.50 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.

2. Georgia (State or country under the law of which it is incorporated) (State or country under the law of which it is incorporated) (FEI number, if applicable)  4. 12/16/1980 (Date of incorporation) (Date of duration, if other than perpetual)  6. (Date of startansacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty hisbility)  7. 503 Carr Road Wilmington, DE 19809 (Principal office address) 500 Swedes Landing Road Wilmington, DE 19801 (Current mailing address, if.different)  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 (Broward County)  Plantation (City)  Plantation (City)  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. further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duttles, and I am familiar with and accept the obligations of my position as registered agent.  James M. Halpin Assistant Secretary (Registered agent's signature)	(If name unavaila	ble in Florida, enter alternate corporate na	ne adopted for the purpose of transacting business i	n Florida)		
(State or country under the law of which it is incorporated) 4. 12/16/1980  (Date of incorporation)  (Date of incorporation)  (Date of incorporation)  (Date first transacted business in Florida, if prior to registration)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  7. 503 Carr Road Wilmington, DE 19809  (Principal office address)  (Current mailing address, if different)  Name: CT Corporation System  Office Address: 1200 South Pine Island Road (Broward County)  Plantation , Florida 33324  (City)  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, further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duttes, and I am familiar with and accept the obligations of my position as registered agent.  James M. Halpin  Assistant Secretary	2. Georgia		3. 58-1471426			
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() Assistant Secretary	Having been name designated in this further agree to co	ed as registered agent and to accept s application, I hereby accept the appo emply with the provisions of all statut amiliar with and accept the obligation	intment as registered agent and agree to act in es relative to the proper and complete perform is of my position as registered agent.	n this capacity.		
Assistant Secretary		/ \				
		Jan M. Hol	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.

# 11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: \_\_\_ Vice Chairman: Address: Director: Aaron Davenport Address: 400 Park Avenue, Suite 820, New York, NY 10022 Director: Jamshid Keynejad Address: 400 Park Avenue, Suite 820, New York, NY 10022 **B. OFFICERS** President: William B. Grubb III Address: 503 Carr Road Wilmington, DE 19809 Vice President: Mathew Minardi Address: 503 Carr Road Wilmington, DE 19809 Secretary: Anthony Ambrosini Address: 503 Carr Road Wilmington, DE 19809 Treasurer: Anthony Ambrosini Address: 503 Carr Road Wilmington, DE 19809 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. AMMONT AMBROSTNI VP FINANCE (Typed or printed name and capacity of person signing application)

7/12/2016 3:24:33 PM From: To: 8506176383( 5/5 )

Courtel Number: 1400224

## STATE OF GEORGIA

## Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 39334-1530

#### CERTIFICATE OF EXISTENCE

1, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

## NORAMCO, INC.

### a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Cooles harotes Coores a resident Installation Provident Leon Susser CIPTURE COMMINSTANCE CONTRACTOR COMMINSTANCE COMMINSTANCE



Brian P. Kemp Secretary of State