

A6000003934

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

04180

W16-53773

Office Use Only



300288468943

09/01/16--01024--019 \*\*740.00

07/29/16--01011--005 \*\*210.00

FILED

16 SEP - 1 PM 4:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 4, 2016

CHRIS FINGLISS  
ONE MAIN STREET, SUITE 800  
CAMBRIDGE, MA 02142

SUBJECT: AEGERION PHARMACEUTICALS, INC.  
Ref. Number: W16000053773

We have received your document for AEGERION PHARMACEUTICALS, INC. and your check(s) totaling \$210.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$950.00.

There is a balance due of \$740.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott  
Regulatory Specialist II

Letter Number: 616A00016373

FILED  
16 SEP - 1 PM 4:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

9/11/16

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Aegerion Pharmaceuticals, 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:

Chris Fingliss

Name of Person

Aegerion Pharmaceuticals, Inc.

Firm/Company

One Main Street, Suite 800

Address

Cambridge, MA 02142

City/State and Zip code

christopher.fingliss@aegerion.com

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

For further information concerning this matter, please call:

Chris Fingliss

857

242-5037

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

FILED  
16 SEP - 1 PM 4:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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.*

Aegerion Pharmaceuticals, 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. 20-2960116  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. February 4, 2005 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

6. January 1, 2013  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. One Main Street Suite 800, Cambridge, MA 02142  
(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)

FILED  
16 SEP - 1 PM 4:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.*

Holly Jones  
(Registered agent's signature) **Holly Jones**  
Assistant 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: See attached addendum \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**B. OFFICERS**

President: Mary Szela \_\_\_\_\_

Address: One Main Street, Suite 800  
Cambridge, MA 02142

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

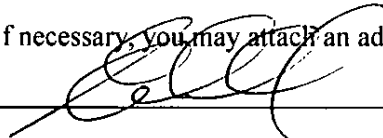
Secretary: Benjamin Harshbarger \_\_\_\_\_

Address: One Main Street, Suite 800, Cambridge, MA 02142

Treasurer: Gregory Perry \_\_\_\_\_

Address: One Main Street, Suite 800, Cambridge, MA 02142

**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. Gary Chedekel, Assistant Treasurer \_\_\_\_\_

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

FILED  
16 SEP -1 PM 4:00  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**Aegerion Pharmaceuticals, Inc.**  
**Directors and Officers**

**Directors**

<b>Name</b>	<b>Position</b>	<b>Address</b>
• Sandford D. Smith	Chairman	One Main Street, Suite 800, Cambridge, MA 02142
• Sol J. Barer	Director	One Main Street, Suite 800, Cambridge, MA 02142
• Antonio M. Gotto, Jr.	Director	One Main Street, Suite 800, Cambridge, MA 02142
• Jorge Plutzky	Director	One Main Street, Suite 800, Cambridge, MA 02142
• David I. Scheer	Director	One Main Street, Suite 800, Cambridge, MA 02142
• Donald K. Stern	Director	One Main Street, Suite 800, Cambridge, MA 02142
• Paul G. Thomas	Director	One Main Street, Suite 800, Cambridge, MA 02142
Anne VanLent	Director	One Main Street, Suite 800, Cambridge, MA 02142

**Officers**

<b>Name</b>	<b>Position</b>	<b>Address</b>
• Mary Szela	President & CEO	One Main Street, Suite 800, Cambridge, MA 02142
• Gregory Perry	Treasurer	One Main Street, Suite 800, Cambridge, MA 02142
• Benjamin Harshbarger	Secretary	One Main Street, Suite 800, Cambridge, MA 02142
• Gary Chedekel	Assistant Treasurer	One Main Street, Suite 800, Cambridge, MA 02142
• Jennifer Fitzpatrick	Assistant Secretary	One Main Street, Suite 800, Cambridge, MA 02142
Alessandro Martuscelli	Assistant Secretary	One Main Street, Suite 800, Cambridge, MA 02142

FILED  
16 SEP - 1 PM 4:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AEGERION 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 SIXTH DAY OF JULY, 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 FRANCHISE TAXES HAVE BEEN PAID TO DATE.

FILED  
16 SEP - 1 PM 4:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



3922075 8300

SR# 20164568145

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State

Authentication: 202589672

Date: 07-06-16