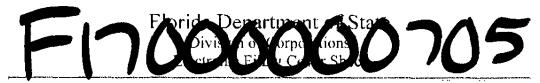
2/14/2017

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Division of Corporations

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Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (614)280-3338

Fax Number

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

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FOREIGN PROFIT/NONPROFIT CORPORATION VetCT, Inc.

Certificate of Status Certified Copy 04 Page Count \$70.00 Estimated Charge

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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. (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 Ffortda). (State or country under the law of which it is incorporated) (FEI number, if applicable) (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) 3505 Lake Lynda Drive, Suite 200, Orlando, FL 32817 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C.T. Corporation System Name: 1200 South Pine Island Road Office Address: Plantation

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.

CT Corporation System

By: Kristin Bolden
Assistant 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.

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

A. DIR	ECTORS		
Chairmai	ı:		
Address:			
Vice Cha	irman;		
	irman:		
Director:	Julien Labruyere		
Address.	St. John's Innovation Centre Cowley Road Cambridge CB4 0WS, United Kingdom		
Director:	Victoria Johnson	· 	
	St. John's Innovation Centre Cowley Road Cambridge CB4 (0WS, United Kingdom		
B. OFF	TCERS Julien Labroyere		
	St. John's Innovation Centre Cowley Road Cambridge CB4 (0WS, United Kingdom		
Vice Pres	ident:	17 FE	- 1
·		730	15.55 15.55
Secretary	Victoria Johnson	≖	5#5 5#6
	St. John's Innovation Centre Cowley Road Cambridge CB4 (0WS, United Kingdom	× 5	
Trensurer	Victoria Johnson		
	St. John's Innovation Centre Cowley Road Cambridge CB4_0WS, United Kingdom		
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or	directors.	
The offic are true a a third de	Signature of Director or Officer per or director signing this document (and who is listed in number 11 above) affirms that the faund that he or she is aware that false information submitted in a document to the Department of egree felony as provided for in s.817.155, F.S. on Labrayere, President	ets stated he f State consti	rein tutes

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



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "VETCT, 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 FOURTEENTH DAY OF FEBRUARY, A.D. 2017.

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

6241259 8300

SR# 20170876627

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

Authentication: 202033224

Date: 02-14-17