

To: Pano2013

2017/08-29 10:13:16 CST

12122023573 From: Kimberly Laughrey

8/29/2017

Division of Corporations

# Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

**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.

((H17000232742 3)))



H170002327423ABC

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

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (512)418-6949

Fax Number : (954)208-0845

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

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

**COR AMND/RESTATE/CORRECT OR O/D RESIGN**

**APOLLO PHARMACEUTICALS USA INC.**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

RECEIVED

17 AUG 29 PM 12:43

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED

17 AUG 29 AM 8:44

Electronic Filing Menu

Corporate Filing Menu

Help

**FAX COVER SHEET**

TO

COMPANY

FAX NUMBER 18506176380

FROM Kimberly Laughrey

DATE 2017-08-29 10:13:01 CST

RE APOLLO PHARMACEUTICALS USA INC.

**COVER MESSAGE**

Robert Sholl  
Associate Fulfillment Specialist  
Global Fulfillment Operations  
CT Corporation

Team 614-280-3338  
[GlobalFulfillmentTeam@wolterskluwer.com](mailto:GlobalFulfillmentTeam@wolterskluwer.com)

**Wolters Kluwer**

1209 Orange Street Wilmington, DE 19801,  
[www.wolterskluwer.com](http://www.wolterskluwer.com)

Confidentiality Notice: This email and its attachments (if any) contain confidential information of the sender. The information is intended only for the use by the direct addressees of the original sender of this email. If you are not an intended recipient of the original sender (or responsible for delivering the message to such person), you are hereby notified that any review, disclosure, copying, distribution or the taking of any action in reliance of the contents of any attachments to this email is strictly prohibited. If you have received this email in error, please immediately notify the sender at the address shown herein and permanently delete any copies of this email (digital or paper) in your possession.

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

SUBJECT: APOLLO PHARMACEUTICALS USA INC.  
Name of Corporation

DOCUMENT NUMBER: F17000002781

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANDREA NAVAROLI  
Name of Contact Person

APOLLO PHARMACEUTICALS USA INC.  
Firm/Company

4400 PGA BOULEVARD #102  
Address

PALM BEACH GARDENS, FL 33410  
City/State and Zip Code

state.licensing@apollopharmainc.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANDREA NAVAROLI at 561 469-9058  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$35.00 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee,  
Certificate of Status &  
Certified Copy  
(Additional copy is  
enclosed)

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**PROFIT CORPORATION**  
**APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO**  
**APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**  
(Pursuant to s. 607.1504, F.S.)

**SECTION I**  
**(1-3 MUST BE COMPLETED)**

F17000002781

(Document number of corporation (if known))

1. APOLLO PHARMACEUTICALS, INC.  
(Name of corporation as it appears on the records of the Department of State)
2. DELAWARE 3. JUNE 30, 2017  
(Incorporated under laws of) (Date authorized to do business in Florida)

**SECTION II**  
**(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? JUNE 23, 2017

5. APOLLO PHARMACEUTICALS USA INC.  
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

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

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

GREGORY J. ELLIS

(Typed or printed name of person signing)

PRESIDENT & COO

(Title of person signing)

17 AUG 29 AM 8:44

FILED

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY THAT THE SAID "APOLLO  
PHARMACEUTICALS, INC.", FILED A CERTIFICATE OF AMENDMENT,  
CHANGING ITS NAME TO "APOLLO PHARMACEUTICALS USA INC." ON THE  
TWENTY-THIRD DAY OF JUNE, A.D. 2017, AT 3:46 O'CLOCK P.M.



6301842 8320  
SR# 20175927799

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

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 203135154  
Date: 08-29-17