122023573 From: Kimberly Laughrey

Division of Corporations **Electronic Filing Cover Sheet** 

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Tc:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023 Phone : (614)280-3338

Fax Number

: (954)208-0845

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| Email A | \ddress: |
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#### FOREIGN PROFIT/NONPROFIT CORPORATION

### Lupin IP Ventures Inc.

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 06      |
| Estimated Charge      | \$70.00 |

JAN 1 6 2018

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## **COVER LETTER**

| TO: Registration Section Division of Corporations  |                |
|--|----------------|
| SUBJECT: Lupin IP Ventures Inc.  |                |
| Name of corporation - must include suffix  |                |
| Dear Sir or Madam:   |                |
| The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Flo<br>"Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register<br>above referenced foreign corporation to transact business in Florida. | orida,"<br>the |
| Please return all correspondence concerning this matter to the following:  |                |
| Mary Ambacher  |                |
| Name of Person   |                |
| Brown Rudnick LLP  |                |
| Firm/Company   |                |
| One Financial Center   |                |
| Address  |                |
| Boston, MA 02111   | (E)            |
| City/State and Zip code  | 5              |
| mambacher@brownrudnick.com   | 1 22           |
| E-mail address: (to be used for future annual report notification)   | - G            |
| For further information concerning this matter, please call:   | ア<br>          |
| 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 & ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee & ☐ Certificate of Status Certified Copy Certified Certified   | e of Status &  |

## 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.

|                  |   | at 16 athaniana of transpating business                                     | ness in Florida) |
|------------------|---|---|------------------|
| If name unavaila | ble in Florida, enter alternate corporate name add                        | ipted for the purpose of transacting ous                                    | 1033 111 101102) |
| Jelaware         | y under the law of which it is incorporated)                              | (FEI number, if applicable  | <u> </u>         |
|                  | under the law of which it is incorporated)                                |   |                  |
| /17/2014         | 5   | (Date of duration, if other than p  |                  |
| (Date            | of incorporation)   | (Date of duration, if other than p  | erpetuar)        |
|                  |   |   |                  |
|                  | (Date first transacted business in F<br>(SEE SECTIONS 607.1501 & 607.1501 | lorida, if prior to registration;  2, F.S., to determine penalty fiability) |                  |
| u Pelican Bay    | Blvd, Suite 500, Naples, FL 34108   |   |                  |
|                  |   | office address)   |                  |
|                  |   |   |                  |
|                  | (2)   | address, if different)  |                  |
|                  | (Curen name   |   |                  |
|                  | and the relational argents (B.O.  | Nov. NOT agrentable)  |                  |
| lame and stree   | et address of Florida registered agent: (P.O.                             | 1401 ucceptuoto   |                  |
| Name:            | C T Corporation System  | <del></del>   | ~2               |
|                  | 1200 South Pine Island Road   |   | : 5              |
| in Addeness      |   | <del></del>   | المام            |
| ce Address:      | Plantation  | Glorida 33324   |                  |
| e Address:       | Plantation (City)   | , Florida 33324 (Zip code)  | . 2              |

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:  | <u></u>                                   |
| Address:  |   |
|   |   |
| Vinita Gupta  |   |
| con Deller Day Plad Suita 500 Names El 34108  |   |
| 7,000   |   |
| Director:   |   |
|   |   |
| Address:  |   |
|   |   |
| B. OFFICERS Vinita Gupta  |   |
| President: 5801 Pelican Bay Blvd, Suite 500, Naples, FL 34108   |   |
| Address:  | 75  |
|   | ,   |
| Vice President:   |   |
| Address:  | <del></del>                               |
|   |   |
| Secretary: Sean Moriarty  | <u> </u>                                  |
| Harborplace Tower, 21st Floor, 111 South Calvert Street, Bultimore, MD 21202  | 2   |
| Bill Gileza   | , -                                       |
| Harborplace Tower, 21st Floor, 111 South Calvert Street, Baltimore, MD 21202  | 2   |
| NOTE: If necessary, you may attach an addendum to the application listing addi  | tional officers and/or directors.         |
|   |   |
| Signature of Director or Officer  | affirms that the facts stated herein      |
| The officer or director signing this document (and who is listed in number 11 about the true and that he or she is aware that false information submitted in a document | nt to the Department of State constitutes |
| a third degree felony as provided for in s.817.155, F.S.  |   |
| 13. Thomas Gillespie, Assistant Secretary   | polication)                               |
| (Typed or printed name and capacity of person signing a   | pplication)                               |

#### ADDENDUM TO

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

Foreign Corporation: Lupin IP Ventures Inc.

11. B. Officers

Assistant Secretary: Thomas Gillespie

Address: 5801 Pelican Bay Blvd, Suite 500, Naples, FL 34108

# Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "LUPIN IP VENTURES 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 SIXTEENTH DAY OF JANUARY, A.D. 2018.

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.

2010 JAN 16 A 10: 11 C

5553107 8300N SR# 20180265115

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

Authentication: 201972510

Date: 01-16-18