

F18000001273

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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18 MAR -9 PM 2:14

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2018 MAR -9 AM 8:13
SECRETARY OF STATE
TALLAHASSEE FLORIDA

MAR 16 2018
J. HARRIS

845
374

CT Corp.

3458 Lakeshore Drive, Tallahassee, FL 32312
850-656-4724

Date: 3/9/2018 ~~3/14/18~~ 3/15/18

Acc#120160000072



Name:	Ultragenyx Pharmaceutical Inc.
Document #:	
Order #:	10871358

Certified Copy of Arts & Amend:	<input type="checkbox"/>			
Plain Copy:	<input type="checkbox"/>			
Certificate of Good Standing:	<input type="checkbox"/>			
	<input type="checkbox"/>			
Apostille/Notarial Certification:	<input type="checkbox"/>		Country of Destination:	
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Ref# _____

Amount: \$ 78.75

Thank you!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ultragenyx Pharmaceutical 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:

Ruben A. Garcia

Name of Person

Ultragenyx Pharmaceutical Inc.

Firm/Company

60 Leveroni Court

Address

Novato, CA 94949

City/State and Zip code

rgarcia@ultragenyx.com; bleonard@ultragenyx.com

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

For further information concerning this matter, please call:

Ruben A. Garcia

415

483-8135

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 15, 2018

CT

SUBJECT: ULTRAGENYX PHARMACEUTICAL INC.
Ref. Number: W18000023487

3/15/18
CORRECTED:

*Please keep original file
date.
Thank you!*

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

You must list the names and street addresses of the officers and directors of the corporation on the form/application.

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.

Jenna D Harris
Regulatory Specialist II

Letter Number: 018A00005221

RECEIVED
DEPARTMENT OF STATE
18 MAR 15 PM 2:36



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 12, 2018

CT

SUBJECT: ULTRAGENYX HARMACEUTICAL INC.
Ref. Number: W18000023487

3/14/18
CORRECTED

Please keep original file date. Also, please correct cover letter to reflect the

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

proper
spelling
of
Pharmaceutical

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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

Thank you!

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

Jenna D Harris
Regulatory Specialist II

Letter Number: 018A00004882

RECEIVED
2018 MAR 14 AM 11:29
FLORIDA DEPARTMENT 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.*

1. Ultragenyx Pharmaceutical Inc.

(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. 27-2546083
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. June 13, 2011 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 60 Leveroni Court, Novato CA 94949
(Principal office address)

Same as above.

(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

Plantation, Florida 33324
(City) (Zip code)

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.



April Wittenwyler, Ast. Sec.

(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.

FILED
2010 MAR -9 AM 9:19
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

A. DIRECTORS

Chairman: Please see attached addendum.

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Please see attached addendum.

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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2018 MAR -9 AM 8:15
SECRETARY OF STATE
TALLAHASSEE FLORIDA

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. Brian Mueller

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.

Karah Parschauer, by Brian Mueller, Attorney in Fact

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

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

Addendum

Response to Question 11(A):

Names and business addresses of directors.

Daniel G. Welch	Lars Ekman, M.D.
Emil D. Kakkis	Matthew K. Fust
William Aliski	Michael Narachi
Deborah Dunsire	Clay B. Siegall

All above listed directors have the following business address:

Ultragenyx Pharmaceutical Inc.
60 Leveroni Court
Novato, California 94949

Response to Question 11(B):

Names and business addresses of officers:

Emil D. Kakkis, M.D., Ph.D. – Chief Executive Officer and President
Camille L. Bedrosian, M.D. – Chief Medical Officer and Executive Vice President
Shalini Sharp – Chief Financial Officer and Executive Vice President
Karah Parschauer – General Counsel and Executive Vice President
Jayson Dallas, M.D. – Chief Commercial Officer and Executive Vice President
Dennis Huang – Chief Technical Operations Officer and Executive Vice President
Thomas Kassberg – Chief Business Officer and Executive Vice President
John R. Pinion II – Chief Quality Officer and Executive Vice President of Translational Sciences

All above listed officers have the following business address:

Ultragenyx Pharmaceutical Inc.
60 Leveroni Court
Novato, California 94949

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

POWER OF ATTORNEY

NOTICE IS HEREBY GIVEN THAT Ultragenyx Pharmaceutical Inc. a company incorporated under the laws of the state of Delaware, does hereby appoint Christine Rein, Kelly Lettmann, Michelle Donato, Mandy Hendricks, Dareth Jeffers, Alan Stachura, Nicole Parnell, Sarah Revelle, Ryan Nelson, Ryan Maher, Erin Franceschi, Natalie Pickens, Stephanie Allison, Michelle Dobbs, Jessica Molloy, Lars Fox, Matthew Sawyer, Shannon Diamond, Adam Steimel, Brad Slenker, Teah Griffin, Lauren Miller, Stacey Busch, Tony Spain, Shanna Loness, Collin Giles, Katie Hannan, Adam Deis, Amanda Weaver, Paige Frentzel, Julie Rachford, Max Bode, Mary Novich and Brian Mueller, Christine Kelm, Darry Verdecchia, Jr., employees of CT Corporation and acting solely in the capacity as employees of CT Corporation, as attorney-in-fact for the company to act for the company and in the company's name for the limited purposes authorized herein.

The company and the subsidiary entities listed, having taken all necessary steps to authorize the changes, hereby grants its attorney-in-fact the power to execute the documents necessary to qualify the company in any state, as directed and authorized by the company.

In the execution of any documents necessary for the sole, limited purpose, set forth herein, Christine Rein, Kelly Lettmann, Michelle Donato, Mandy Hendricks, Dareth Jeffers, Alan Stachura, Nicole Parnell, Sarah Revelle, Ryan Nelson, Ryan Maher, Erin Franceschi, Natalie Pickens, Stephanie Allison, Michelle Dobbs, Jessica Molloy, Lars Fox, Matthew Sawyer, Shannon Diamond, Adam Steimel, Brad Slenker, Teah Griffin, Lauren Miller, Stacey Busch, Tony Spain, Shanna Loness, Collin Giles, Katie Hannan, Adam Deis, Amanda Weaver, Paige Frentzel, Julie Rachford, Max Bode, Mary Novich and Brian Mueller, Christine Kelm, Darry Verdecchia, Jr., shall exercise the power of Vice President or Secretary.

This Power of Attorney expires when revoked by the undersigned

IN WITNESS WHEREOF the undersigned has executed this Power of Attorney on this 5th day of March, 2018.

Ultragenyx Pharmaceutical Inc.
A Delaware Company

Signature of Pres, VP, Sec or Treas:

Name: Karah Parschauer

Title: EVP and General Counsel



State of <<State of Notary>>

County of <<County of Notary>>

See attached

On <<Date>>, before me, the undersigned, a Notary Public in and for said State, personally appeared <<Name of Officer who Signed>>, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me he/she/they executed the same in his/her/their authorized capacity (ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed this instrument.

Witness my hand and official seal. _____

<<Name of Notary>>, Notary Public

CALIFORNIA JURAT WITH AFFIANT STATEMENT**GOVERNMENT CODE § 8202**

- ☒ See Attached Document (Notary to cross out lines 1-6 below)
☐ See Statement Below (Lines 1-6 to be completed only by document signer[s], *not* Notary)

[Handwritten signature]

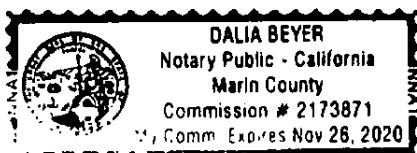
Signature of Document Signer No. 1_____
Signature of Document Signer No. 2 (if any)

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of Marin

Subscribed and sworn to (or affirmed) before me

on this 5th day of March, 2018.
by _____ Date _____ Month _____ Year _____(1) Karen Herdman Parschauer(and (2) _____),
Name(s) of Signer(s)proved to me on the basis of satisfactory evidence
to be the person(s) who appeared before me.Signature *[Signature]*
Signature of Notary Public

Seal
Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: _____ Document Date: _____

Number of Pages: _____ Signer(s) Other Than Named Above: _____

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ULTRAGENYX PHARMACEUTICAL 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 EIGHTH DAY OF MARCH, 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.



4995929 8300

SR# 20181794887

You may verify this certificate online at 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: 202282590

Date: 03-08-18