

Division of Corporations

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FR000002102

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)694-1639

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

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION

Mezzion Pharmaceuticals Inc.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

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.

Mezzion 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)
Delaware

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FBI number, if applicable)
01/06/2016

4. _____ 5. _____
(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)
400 Kelby Street 12 FL, Suite G, Fort Lee, NJ 07024

7. _____
(Principal office address)

_____ (Current mailing address, if different)

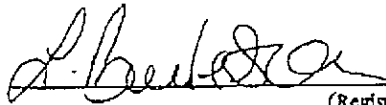
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Paracorp Incorporated
155 Office Plaza Drive, 1st Floor

Office Address: Tallahassee, Florida 32301
(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.



Leticia Burleson, 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.

2018 MAY -4 PM 12:01
DEPARTMENT OF STATE
TALLAHASSEE FLORIDA

FILED

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

A. DIRECTORS

See attached.

Chairman: _____

Address: _____

See attached.

Vice Chairman: _____

Address: _____

See attached.

Director: _____

Address: _____

See attached.

Director: _____

Address: _____

B. OFFICERS

See attached.

President: _____

Address: _____

See attached.

Vice President: _____

Address: _____

See attached.

Secretary: _____

Address: _____

See attached.

Treasurer: _____

Address: _____

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.

James Yeager, Secretary

13. _____

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

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TALLAHASSEE FLORIDA

Addendum to Application by Foreign Corporation For Authorization to Transact Business in Florida

ADDENDUM A
Mezzion Pharmaceuticals, Inc.
Officer and Director List

A. OFFICERS

- Chief Executive Officer: In Jin Choi
- Address: 400 Kelby St. 12 FL, Suite G, Fort Lee, NJ 07024
- Secretary: James Yeager
- Address: 400 Kelby St. 12 FL, Suite G, Fort Lee, NJ 07024
- Treasurer: Dong Hyun Park
- Address: 400 Kelby St. 12 FL, Suite G, Fort Lee, NJ 07024

B. DIRECTORS

- Director: In Jin Choi
- Address: 400 Kelby St. 12 FL, Suite G, Fort Lee, NJ 07024
- Director: Dong Hyun Park
- Address: 400 Kelby St. 12 FL, Suite G, Fort Lee, NJ 07024
- Director: James Yeager
- Address: 400 Kelby St. 12 FL, Suite G, Fort Lee, NJ 07024

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SECOND DEPT. 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 "MEZZION 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 THIRTIETH DAY OF APRIL, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MEZZION PHARMACEUTICALS, INC." WAS INCORPORATED ON THE SIXTH DAY OF JANUARY, A.D. 2016.

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



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SR# 20183140430

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


Jeffrey W. Bullock, Secretary of State

Authentication: 202602133

Date: 04-30-18