F18000003558

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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K. SALY AUG - 6 2018 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 332393 7654513

AUTHORIZATION :

COST LIMIT : (\$ '%.0'.00

ORDER DATE : August 3, 2018

ORDER TIME : 12:11 PM

ORDER NO. : 332393-005

CUSTOMER NO: 7654513

FOREIGN FILINGS

NAME: EAGLE PHARMACEUTICALS, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

COVER LETTER

	tration Section of Cor						
D1113		rmaceuticals, Inc.					
SUBJECT:			of corporation	ı - must i	include suffix		
		,	- · · · · · · · · · · · · · · · · · · ·				
Dear Sir or M	iadam:						
"Certificate o	f Existenc		of Good Star	nding" a	nd check are sub	ct Business in Florida," omitted to register the	
Please return	all corresp	ondence concern	ing this matte	r to the f	ollowing:		
Theodora Bon	elli						
•			Name of	Person			
Eagle Pharmac	ceuticals, In	ic.					
			Firm/Con	npany			
50 Tice Boule	vard, Suite	315					
			Addr	ess			
Woodcliff Lak	e, NJ 0767	7					
			City/State a	nd Zip c	ode	.	
tbonelli@eagle	eus.com						
		E-mail address	s: (to be used	for futur	e annual report i	notification)	
For further in	formation	concerning this n	natter, please	call:			
Theodora Bon	clli		201 at (746-	7867		
Nam	e of Perso	n	Area Coo	le	Daytime Telep	hone 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 Tallahassec, FL 32314			
Enclosed is a \$70.00 Fil		the following am \$78.75 Filin Certificate	g Fee & 0		S Filing Fee & ied Copy	S87.50 Filing Fee. Certificate of Status & Certified Copy	

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.

Delaware		name adopted for the purpose of transacting 20-8179278		
2. (State or country under the law of which it is incorporated) (FEI number, if applicable)				
01/02/2007				
(Date	of incorporation)	5. (Date of duration, if other th	an perpetual)	
	(SEE SECTIONS 607.1501 & 6	ness in Florida, if prior to registration) 507.1502, F.S., to determine penalty liability) 18 S	
same as above	d, Suite 315, Woodchiff Lake, NJ 0/6//	rincipal office address)	AUG -	
	(Current	mailing address, if different)	SET	
8. Name and <u>stree</u> Name:	at address of Florida registered agent Corporation Service Company	(P.O. Box <u>NOT</u> acceptable)	AH 12: 5% FEE, FLORIDA	
	1201 Hays Street			
Office Address:	Tallahassee	32301 Florida		
	(City)	, Florida (Zip code)		

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. Nan	mes and business addresses of officers and/or directors:	18 AUG -3 TALLAHASSE	LED
A. DIR	RECTORS	Sec. 3	Δw
Chairmar	n:	TALLAHARAY	1112:52
Address:		TALLAHASSEE,	FLORIDA
Vice Cha	airman:		
Address:			
Director:	Scott Tarriff		
Address:	50 Tice Boulevard, Suite 315		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Woodcliff Lake, NJ 07677		
Director	Sander Flaum		
	50 Tice Boulevard, Suite 315		
Address.	Woodcliff Lake, NJ 07677		
	David M. Pernock, President & Chief Commercial Officer 50 Tice Boulevard, Suite 315 Woodcliff Lake, NJ 07677		
Vice Pres	sident:		
Address:			
Secretary	Michael Cordera, Secretary		
	50 Tice Boulevard, Suite 315, Woodcliff Lake, NJ 07677		
Treasurer	n		
Address:			Djeak sky
NOTE:	If necessary, you may attach an addendum to the application listing additional off	ficers and/or directe	ors. Attachment F
12			
are true a	Signature of Director or Officer cer or director signing this document (and who is listed in number 11 above) affirm and that he or she is aware that false information submitted in a document to the Degree felony as provided for in s.817.155, F.S.		
13. <u>Micl</u>	hael W. Cordera, Secretary, Executive Vice President and General Counsel		
	(Typed or printed name and capacity of person signing application	1)	

ATTACHMENT A - Eagle Pharmaceuticals, Inc.

Corporate Officers:

Scott L. Tarriff, Chief Executive Officer 50 Tice Boulevard, Suite 315 Woodcliff Lake, NJ 07677

David M. Pernock, President & Chief Commercial Officer 50 Tice Boulevard, Suite 315 Woodcliff Lake, NJ 07677

Peter A. Meyers, Chief Financial Officer and Treasurer 50 Tice Boulevard, Suite 315 Woodeliff Lake, NJ 07677

Adrian Hepner, Executive Vice President and Chief Medical Officer 50 Tice Boulevard, Suite 315 Woodcliff Lake, NJ 07677

Michael Cordera, Secretary 50 Tice Boulevard, Suite 315 Woodcliff Lake, NJ 07677

Directors:

Scott Tarriff

50 Tice Boulevard, Suite 315, Woodcliff Lake, NJ 07677

Sander Flaum

50 Tice Boulevard, Suite 315 Woodcliff Lake, NJ 07677

Steven Ratoff

50 Tice Boulevard, Suite 315 Woodcliff Lake, NJ 07677

Douglas L. Braunstein

50 Tice Boulevard, Suite 315 Woodeliff Lake, NJ 07677

Michael Graves

50 Tice Boulevard, Suite 315 Woodcliff Lake, NJ 07677

Robert Glenning

50 Tice Boulevard, Suite 315 Woodcliff Lake, NJ 07677

Richard A. Edlin

50 Tice Boulevard, Suite 315 Woodcliff Lake, NJ 07677



Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "EAGLE 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 THIRD DAY OF AUGUST, 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 SAID "EAGLE

PHARMACEUTICALS, INC." WAS INCORPORATED ON THE SECOND DAY OF

JANUARY, A.D. 2007.

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

18 AUG -3 AM 1: 00
SECRETARY OF STATE
TALL AHASSEE FLORING



Authentication: 203183907

Date: 08-03-18