

F18000004643

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

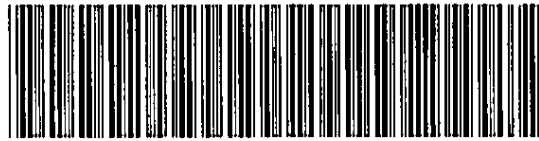
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W18-86374
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FILED
18 OCT - 6 AM 8:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K SAIY
OCT - 8 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 26, 2018

POLLEEN BUTLER
POLARITYTE, INC.
1960 SOUTH 4250 WEST
SALT LAKE CITY, UT 84104

SUBJECT: POLARITYTE, INC.
Ref. Number: W18000086374

We have received your document for POLARITYTE, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain both the street address of the principal office and the mailing address of the entity.

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.

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

Karen A Saly
Regulatory Specialist II

Letter Number: 818A00020143

COVER LETTER

2018 OCT -5 AM 10:28
OFFICE OF THE SECRETARY

TO: Registration Section
Division of Corporations

SUBJECT: PolarityTE, 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:

Colleen Butler

_____	Name of Person
PolarityTE, Inc.	
_____	Firm/Company
1960 South 4250 West	
_____	Address
Salt Lake City, Utah 84104	
_____	City/State and Zip code
colleenbutler@polarityte.com	
_____	E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Colleen Butler	385	237-4268
_____	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

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. PolarityTE, 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. 06-1529524
 (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. May 8, 1998 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. 1960 South 4250 West Salt Lake City Utah 84104
 (Principal office address)

 (Current mailing address, if different)

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

Name: URS Agents, LLC
 Office Address: 3458 Lakeshore Drive
Tallahassee, Florida 32312
 (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.

URS Agents, LLC
 by Christian Eubanks Christian Eubanks, 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.

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 TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: _____
Address: _____

Vice Chairman: _____
Address: _____

Director: _____
Address: _____

Director: _____
Address: _____

B. OFFICERS

President: Denver Lough, MD
Address: 1960 South 4250 West Salt Lake City, Utah 841041

Vice President: Edward Swanson, MD
Address: 1960 South 4250 West Salt Lake City, Utah 84104

Secretary: Please see attached Exhibit A
Address: _____

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.

13. Cameron Hoyler, CLO
(Typed or printed name and capacity of person signing application)



EXHIBIT A

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Denver Lough, M.D., Ph.D.
Chairman of the Board, President, Chief Executive Officer, Chief Scientific Officer

Edward Swanson, M.D.
Executive Vice President, Chief Operating Officer & Director

Paul Mann
Chief Financial Officer

Steve Gorlin
Director

Jon Mogford, PhD
Director

Jeff Dyer, MBA, PhD
Director

Willie C. Bogan
Director

Peter Cohen
Director

Ramses Erdtmann
Director

David Seaburg
Director

The address for all the above Directors:

1960 South 4250 West Salt Lake City, Utah 84104

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "POLARITYTE, 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 SECOND 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 FRANCHISE TAXES HAVE BEEN PAID TO DATE.

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18 OCT -6 AM 8:49
STATE OF DELAWARE
FALL MILLS, DELAWARE



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SR# 20185934185

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

A handwritten signature in black ink, appearing to read "JBULLOCK", 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: 203179232

Date: 08-02-18