

FI900005529

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

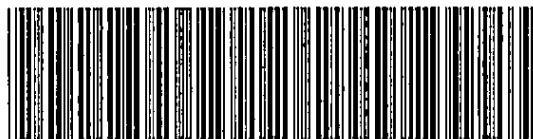
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/29/19--01315--016 **100.00

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CLERK OF THE COURT
TALLAHASSEE, FLORIDA

✓

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Nanobiotix Corp.

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:

Maeve Lawlor

Name of Person	FILED 2019 NOV 20 PM 3:38 SILVIA D. VANCE, CLERK TALLAHASSEE, FLORIDA
Axelia Partners	
Firm/Company	
185 Alewife Brook Parkway, Suite 210	
Address	
Cambridge, MA 02138	
City/State and Zip code	
mlawlor@axeliapartners.com	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

Maeve Lawlor	617	576-2005
Name of Person	at (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. Nanobiotix Corp.
(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. DE 3. 32-0448581
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 09/2/2014 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. 06/27/2019
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 210 Broadway, Cambridge, MA 02139
(Principal office address)
- 185 Alewife Brook Parkway, Suite 210, Cambridge, MA 02138
(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.



Leslie Martin, 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

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

A. DIRECTORS

Chairman: Laurent Levy

Address: 210 Broadway, Cambridge, MA 02139

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Patrick Tricoli

Address: 210 Broadway, Cambridge, MA 02139

Vice President: _____

Address: _____

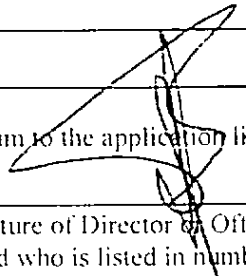
Secretary: Patrick Tricoli

Address: 210 Broadway, Cambridge, MA 02139

Treasurer: Philippe Mauberna

Address: 210 Broadway, Cambridge, MA 02139

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. Patrick Tricoli, President

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

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TALLAHASSEE, FLORIDA

Delaware

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "NANOBIOTIX CORP." 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 FIFTH DAY OF NOVEMBER, A.D. 2019.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SR# 20197925693

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


Jeffrey W. Bullock, Secretary of State

Authentication: 203941636

Date: 11-05-19