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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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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)214-8442

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

Email Address: _____

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2020 DEC -9 PM 4:21

FOREIGN PROFIT/NONPROFIT CORPORATION
FHI Clinical Inc.

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$78.75

~~DEC -9-2020~~

M. SOLOMON

Electronic Filing Menu

Corporate Filing Menu

Help

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. FHI Clinical Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/11/2018 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, P.S., to determine penalty liability)

7. 359 Blackwell Street, Durham, NC 27701
(Principal office street address)

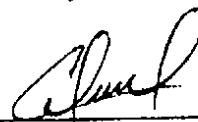
(Current mailing address, if different)

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

Name: Corporate Creations Network Inc.
Office Address: 801 US Highway 1
North Palm Beach, Florida 33408
(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.



(Registered agent's signature) Carlos M Alvarez, Special Secretary

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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

2020 DEC -9 AM 8:57

A. DIRECTORS

☒ **Chairman** Name: Edward W. Whitehorne
☐ **Vice Chairman** Address: 359 Blackwell Street
Durham, NC 27701
☒ **Director**
☐ **President**
☐ **Vice President**
☐ **Secretary** ☐ **Treasurer**
☐ **Other** ☐ **Other**

☐ **Chairman** Name: Ted Fitzgerald
☐ **Vice Chairman** Address: 359 Blackwell Street
Durham, NC 27701
☐ **Director**
☒ **President**
☐ **Vice President**
☐ **Secretary** ☐ **Treasurer**
☒ **Other** Chief Executive Officer ☐ **Other**

☐ **Chairman** Name: Robert R. Price
☐ **Vice Chairman** Address: 359 Blackwell Street
Durham, NC 27701
☐ **Director**
☐ **President**
☒ **Vice President**
☒ **Secretary** ☐ **Treasurer**
☐ **Other** ☐ **Other**

☐ **Chairman** Name: Patrick C. Fine
☒ **Vice Chairman** Address: 359 Blackwell Street
Durham, NC 27701
☒ **Director**
☐ **President**
☐ **Vice President**
☐ **Secretary** ☐ **Treasurer**
☐ **Other** ☐ **Other**

☐ **Chairman** Name: Rasika Padmaperuma
☐ **Vice Chairman** Address: 359 Blackwell Street
Durham, NC 27701
☐ **Director**
☐ **President**
☐ **Vice President**
☐ **Secretary** ☒ **Treasurer**
☒ **Other** Chief Financial Officer ☐ **Other**

☐ **Chairman** Name: Please see additional attached.
☐ **Vice Chairman** Address:
☐ **Director**
☐ **President**
☐ **Vice President**
☐ **Secretary** ☐ **Treasurer**
☐ **Other** ☐ **Other**

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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. Carlos M Alvarez, Attorney-In-Fact
 (Typed or printed name and capacity of person signing application)

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FILED

Attachment to Application by
Foreign Corporation for Authorization to
Transact Business in Florida

FHI Clinical Inc.
359 Blackwell Street,
Durham, NC 27701

Additional Directors:

1. Pamela Meyers - 359 Blackwell Street, Durham, NC 27701
2. Albert J. Siemens - 359 Blackwell Street, Durham, NC 27701
3. Greg Connors - 359 Blackwell Street, Durham, NC 27701

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CLERK OF SUPERIOR COURT
JANUARY 10 2021

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FHI CLINICAL 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 TWENTY-FIFTH DAY OF NOVEMBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FHI CLINICAL INC." WAS INCORPORATED ON THE ELEVENTH DAY OF OCTOBER, A.D. 2018.

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



7096393 8300

SR# 20208494087

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 in a small font.

Authentication: 204165963

Date: 11-25-20