

1/7/2021

Division of Corporations

**F21000007422 III**

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 : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (514)280-3338  
Fax Number : (954)208-0845

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

Email Address: \_\_\_\_\_

# FOREIGN PROFIT/NONPROFIT CORPORATION

**Eidos Therapeutics, Inc.**

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

JAN - 8 2021

M. SOLOMON

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Corporate Filing Menu

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## 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. Eidos Therapeutics, Inc.  
(Enter name of corporation, must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltz.," "Co.," or "Corp.")
2. Delaware 3. 46-3733671  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. August 6, 2013 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)
6. January 5, 2021  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 101 Montgomery Street, Suite 2550, San Francisco, CA 94104  
(Principal office address)
- \_\_\_\_\_  
(Current mailing address, if different)

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

Name: C T 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.*

C T Corporation System

By: CHRIS RICKARD, 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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 DEPT. OF STATE  
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## 11. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Neil Kumar \_\_\_\_\_

Address: 101 Montgomery Street, Suite 2550, San Francisco, CA 94104 \_\_\_\_\_

Director: Uma Sinha \_\_\_\_\_

Address: 101 Montgomery Street, Suite 2550, San Francisco, CA 94104 \_\_\_\_\_

**B. OFFICERS**

President: Jonathan Fox \_\_\_\_\_

Address: 101 Montgomery Street, Suite 2550, San Francisco, CA 94104 \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Franco Valle \_\_\_\_\_

Address: 101 Montgomery Street, Suite 2550, San Francisco, CA 94104 \_\_\_\_\_

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. Franco Valle, Secretary \_\_\_\_\_

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

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**EIDOS THERAPEUTICS, INC.****ADDENDUM****ADDITIONAL DIRECTORS AND OFFICERS**

<u>Name</u>	<u>Title</u>	<u>Address</u>
Douglas Rohlen	Director	101 Montgomery Street, Suite 2550 San Francisco, CA 94104
William Lis	Director	101 Montgomery Street, Suite 2550 San Francisco, CA 94104
Suzanne Sawochka Hooper	Director	101 Montgomery Street, Suite 2550 San Francisco, CA 94104
Ali Sarvat	Director	101 Montgomery Street, Suite 2550 San Francisco, CA 94104
Jonathan Fox	Chief Medical Officer	101 Montgomery Street, Suite 2550 San Francisco, CA 94104
Uma Sinha	Chief Scientific Officer	101 Montgomery Street, Suite 2550 San Francisco, CA 94104
Franco Valle	Principal Accounting Officer	101 Montgomery Street, Suite 2550 San Francisco, CA 94104

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CLERK OF SUPERIOR COURT  
SAN FRANCISCO, CALIF.

# Delaware

The First State

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



5378782 8300

SR# 20208542787

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://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: 204214122

Date: 12-02-20