

F21000001993

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

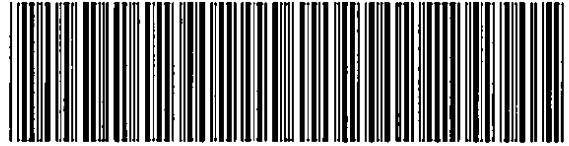
(Document Number)

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*Amend*

FILED

2023 JUL 27 PM 12 19

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

A. RAMSEY  
JUL 28 2023

DIRECTOR'S OFFICE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

2023 JUL 27 PM 3:24

RECEIVED

**CT CORP**  
**(850)656-4724**  
**3458 Lakeshore Drive,**  
**Tallahassee, FL 32312**

**Date:** 07/27/2023

Acc#120160000072

*en: c DW*

Name:	Longeveron Inc
Document #:	
Order #:	15052398

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

Filing: <input checked="" type="checkbox"/>	Certified: <input checked="" type="checkbox"/>
	Plain: <input type="checkbox"/>
	COGS: <input type="checkbox"/>

Email Address for Annual Report Notification

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Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ **43.75**

Thank you!

**COVER LETTER**

**TO:** Amendment Section Division of Corporations

**SUBJECT:** LONGEVERON INC

Name of Corporation

**DOCUMENT NUMBER:** F21000001993

The enclosed Amendment and fee are submitted for filing

Please return all correspondence concerning this matter to the following

Shaun Fleming, Corporate Paralegal

Name of Contact Person

Buchanan Ingersoll & Rooney PC

Firm/Company

501 Grant St , Suite 200

Address

Pittsburgh, PA 15219

City/State and Zip Code

elozada@longeveron.com

E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call

Shaun Fleming

at ( 412 ) 561-1588

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☒ \$43.75 Filing Fee &  
Certified Copy

☐ \$52.50 Filing Fee,  
Certificate of Status &  
Certified Copy

**Mailing Address:**

Amendment Section  
Division of Corporations  
P O Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N Monroe Street, Suite 810  
Tallahassee, FL 32303

FILED

PROFIT CORPORATION  
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR  
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

2023 JUL 27 PM 12:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SECTION I  
(1-3 MUST BE COMPLETED)

F21000001993

(Document number of corporation (if known))

Longeveron Inc

(Name of corporation as it appears on the records of the Department of State)

2 Delaware

3 04/12/2021

(Incorporated under laws of)

(Date authorized to do business in Florida)

SECTION II  
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4 If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? \_\_\_\_\_

5 \_\_\_\_\_  
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

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

6 If the amendment changes the period of duration, indicate new period of duration

(New duration)

7 If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction

(New jurisdiction)

8 If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent \_\_\_\_\_

(Florida street address)

New Registered Office Address \_\_\_\_\_

(City)

Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:


*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position*

\_\_\_\_\_  
Signature of New Registered Agent, if changing

9 If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change

<u>Title/Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Treasurer <input checked="" type="checkbox"/>	James Clavijo	1951 NW 7th Avenue, Ste 520	Add
		Miami, FL 33136	<input checked="" type="checkbox"/> Remove
Treasurer <input checked="" type="checkbox"/>	Lisa Locklear	1951 NW 7th Avenue, Ste 520	<input checked="" type="checkbox"/> Add
		Miami, FL 33136	<input checked="" type="checkbox"/> Remove
Director	Donald Soffer	1951 NW 7th Avenue, Ste 520	<input checked="" type="checkbox"/> Add
		Miami, FL 33136	<input checked="" type="checkbox"/> Remove
Director	Erin Borger	1951 NW 7th Avenue, Ste 520	Add
		Miami, FL 33136	<input checked="" type="checkbox"/> Remove
Director	Todd Girolamo	1951 NW 7th Avenue, Ste 520	Add
		Miami, FL 33136	<input checked="" type="checkbox"/> Remove

- 10 Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated

  
 (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Wa'el Hashad                      CEO  
 (Typed or printed name of person signing)                      (Title of person signing)

FILING FEE \$35.00

**STATE OF FLORIDA**  
**ATTACHMENT TO**  
**APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE**  
**AMENDMENT TO APPLICATION**  
**FOR AUTHORIZATION TO TRANSACT BUSINESS**

**LONGEVERON INC.**

**E21000001993**

**Additional Directors:**

Please add the following directors:

Khoso Baluch  
1951 NW 7<sup>th</sup> Avenue, Suite 520  
Miami, FL 33136

Jeffrey Pfeffer  
1951 NW 7<sup>th</sup> Avenue, Suite 520  
Miami, FL 33136

Wa'el Hashad  
1951 NW 7<sup>th</sup> Avenue, Suite 520  
Miami, FL 33136