F21000002458

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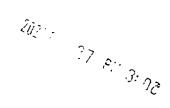
TO: Amendment Section Division of Corporations	
Misemer Pharmaceutical, Inc	
22.222.22	Name of Corporation
DOCUMENT NUMBER: F21000002458	
The enclosed Affidavit by Foreign Corpor submitted for filing.	ration to Change/Add Officer(s) and/or Director(s) and fee are
Please return all correspondence concerning	g this matter to the following:
Jenna Wismer	
Name of Contact Person	
Misemer Pharmaceutical, Inc	
Firm/Company	
505 East Jackson Street, Ste 209	
Address	
Tampa, FL 33602	
City/State and Zip Code	
Ardim@misemerrx.com	
E-mail address: (to be used for future ann	ual report notification)
For further information concerning this ma	tter, please call:
Jenna Wismer	502 608-9132
Name of Contact Person	at () Area Code & Daytime Telephone Number
Enclosed is a check made payable to the Fl	orida Department of State for the following amount:
□\$35.00 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certified of Status & Certified Copy (Additional copy is enclosed)
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S) AND/OR DIRECTOR(S)

(Note: Applicable only during	ng the first calendar year of qualification)
The name of the foreign corporation as it a Misemer Pharmaceutical, Inc	appears on the records of the Florida Department of State is:
2. This entity was authorized to transact businumber is F21000002458	ness in Florida on 4/26/2021 and its Florida document
3. This corporation was formed under the law	rs of Foreign Profit Corporation
4. The name and address of each officer and/	or director is as follows:
<u>Title:</u> CFO	Name and Address MIHAJLI, ARDI
	505 E. JACKSONV ST
	STE. 209TAMPA, FL 33602
Director, Presiden	Rachna Kapoor
	505 East Jackson Street,
	Ste 209Tampa, FL 33602
Attach additi	onal pages if necessary) CFO
nature of an officer or director	Title of person signing
ihaili	

Typed or printed name of person signing

FILING FEE \$35

Make checks payable to Florida Department of State and Mail to: Division of Corporations*PO Box 6327*Tallahassee, FL 32314