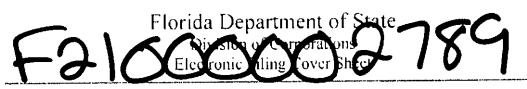
5/19/2021 Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023 Phone : (614)280-3338 : (954)208-0845 Fax Number

**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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FOREIGN PROFIT/NONPROFIT CORPORATION PASITHEA THERAPEUTICS CORP.

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

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Help

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From: James Tanks

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.

PASITHEA TH	ERAPEUTICS CORP.			_
	orporation; must include "INCORPORATED," orp." "Inc." "Co," or "Corp.")	"COMPANY," "CORPORATION,"		
(If name unavaila	able in Florida, enter alternate corporate name		ousiness in Florida)	-
2. Delaware	y under the law of which it is incorporated)	85-1591963	<u> </u>	_
(Date	of incorporation) 5.	(Date of duration, if other the	an perpetual)	-
6.				_
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.1	n Florida, if prior to registration) 502, F.S., to determine penalty liability))	
7 HHI Lincoln Ros	nd. Suite 500, Miami Beach, FL 33139			_
· · · · · · · · · · · · · · · · · · ·	(Princi	pal office address)		
		10.100		
	(Current math	ng address, if different)	2 2 2	
V. Nama and strai	et address of Florida registered agent: (P.	O Box NOT acceptable)		
Name:	C'T Corporation System	<u></u> ,	2#21 HAY 19	
Office Address:	1200 South Pine Island Road		; "	
	Plantation	, Florida	9: 2	
	(City)	(Zip code)	7	
designated in this further agree to c duties, and I am j By:	ned as registered agent and to accept served application, I hereby accept the appoint comply with the provisions of all statutes familiar with and accept the obligations of CT Corporation (St. Olga Hinkel	ment as registered agent and agree relative to the proper and complete of my position as registered agent.	e to act in this cap e performance of	meny. T
(JIYA FIIRIKEI, YE U MSSU SEU			

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

	Prof. Lawrence Steinman
	113.1 Lincoln Road, Suite 500, Miami Beach, FL 33139
Address: ,	
Director:	Dr. Tiago Reis Marques
	1111 Lincoln Road, Suite 500, Miami Beach, FL 33139
_	
Director:	Simon Dumesnit
Address: _	1111 Lincoln Road, Suite 500, Miami Beach, FL 33139
	Dr. Yassine Bendiabdallah
	111) Lincoln Road, Suite 500, Miami Beach, FL 33139
Address:	
B. OFF	ICERS
CEO:	Dr. Tiago Reis Marques, Chief Executive Officer
Address:	1111 Lincoln Road, Suite 500, Miami Beach, FL 33139
	ident:
Address:	
COO:	Dr. Yassine Bendiabdallah, Chief Operating Officer
Address:	1111 Lincoln Road, Suite 500, Miami Beach, FL 33139
CFO:	Stanley M. Gloss, Chief Financial Officer
Address:	1111 Lincoln Road, Suite 500, Miami Beach, FL 33139
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12	Signature of Director or Officer The state of the facts stated herein the facts stated herein
are true a third d	and that he or she is aware that false information submitted in a document to the Department of State constitutes legree felony as provided for in s.817.155, F.S.
13. <u>Dr</u> .	Yassine Bendiabdallah, Chief Operating Officer
	(Typed or printed name and capacity of person signing application)

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PASITHEA THERAPEUTICS 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 NINETEENTH DAY OF MAY, A.D. 2021.

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.

7977896 8300

Authentication: 203244827

Date: 05-19-21