

Division of Corporations

F21000006398

Florida Department of State
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 : FCA000000023
Phone : (614) 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

Acer Therapeutics Inc.

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

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TALLAHASSEE FLORIDA

NOV -8 2021

M. SOLOMON

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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.*

Acer Therapeutics Inc.

1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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

2. DE 3. 32-0426967
(State or country under the law of which it is incorporated) (FEI number, if applicable)
05-15-2018 Perpetual
4. 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
11/1/2021

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. One Gateway Ctr, Suite 351, Newton, Massachusetts 02458, United States
(Principal office address)

(Current mailing address, if different)

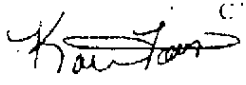
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

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.

By:  C T Corporation System
by Kaity Toon, Asst. Sect.
(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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11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Stephen J. Aselage,

Chairman:

One Gateway Ctr, Suite 351, Newton, Massachusetts 02458

Address:

Vice Chairman:

Address:

Jason Amello

Director:

One Gateway Ctr, Suite 351, Newton, Massachusetts 02458

Address:

John Dunn

Director:

One Gateway Ctr, Suite 351, Newton, Massachusetts 02458

Address:

B. OFFICERS

Chris Schelling (CEO)

President:

One Gateway Ctr, Suite 351, Newton, Massachusetts 02458

Address:

Vice President:

Address:

Don Joseph

Secretary:

One Gateway Ctr, Suite 351, Newton, Massachusetts 02458

Address:

Harry Palmieri (CFO)

Treasurer:

One Gateway Ctr, Suite 351, Newton, Massachusetts 02458

Address:

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12.

Don Joseph

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.

Don Joseph Secretary

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

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Directors continued:

Michelle Griffin One Gateway Ctr, Suite 351, Newton, Massachusetts 02458

Chris Schelling One Gateway Ctr, Suite 351, Newton, Massachusetts 02458

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11-5-21

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ACER 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 FIFTH DAY OF NOVEMBER, 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.



6886077 8300

SR# 20213716119

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: 204610332

Date: 11-05-21