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Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE : 714328 7515237 AUTHORIZATION : COST LIMIT ORDER DATE: May 2, 2023 ORDER TIME : 9:33 AM ORDER NO. : 714328-005 CUSTOMER NO: 7515237 FOREIGN FILINGS NAME: ARS PHARMACEUTICALS, INC. XX CORPORATE ____ LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY XXXX AMENDMENT PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: __ CERTIFIED COPY XX PLAIN STAMPED COPY ___ CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Eyliena Baker -- EXT#

CORPORATION SERVICE COMPANY

1201 Hays Street

COVER LETTER

TO: Amendme	ent Section Division of Corporati	ons		
SUBJECT: AR	S Pharmaceutical	s, Inc.		
	Name	e of Corporation		
DOCUMENT NU	MBER: F22000004340)		
The enclosed Ame	ndment and fee are submitted for	filing.		
Please return all co	rrespondence concerning this ma	atter to the followin	g:	
Kristin Wi	lls			
	Name of Contact Person		<u> </u>	
ARS Phar	maceuticals Opera	ations, Inc.		
	Firm/Company		-	
11682 EI	Camino Real Ste	120		
	Address		_	
San Dieg	o, CA 92130			
	City/State and Zip Code			
kristinw@a	ars-pharma.com			
	ss: (to be used for future annual r	report notification)		
For further informa	ation concerning this matter, plea	se call:		
Kristin Wi	•	949	,292-2	335
	of Contact Person	at (_'	Celephone Number
Enclosed is a check	for the following amount:			
□\$35 Filing Fee	■ \$43.75 Filing Fee &	☐ \$43.75 Filing Fee &		-
	Certificate of Status Certified		οy	Certificate of Status & Certified Copy
Mailing Address:		Street A	Address:	
Amendment Section		Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street. Suite 810		

Tallahassee, FL 32303

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.)

SECTION I (1-3 MUST BE COMPLETED)

FON CILEO MOS 52 F22000004340 (Document number of corporation (if known) ARS Pharmaceuticals, Inc. (Name of corporation as it appears on the records of the Department of State) Delaware (Date authorized to do business in Florida) (Incorporated under laws of) 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? 11/8/2022 ARS Subsidiary, Inc. (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) If the amendment changes the period of duration, indicate new period of duration. 6. (New duration) 7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction. (New jurisdiction) 8. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

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

Title/ Capacity	Name	<u>Address</u>	Type of Action
			□Add
			□Remove
			□Remove
			□Add
			□Remove
			□Add
			□Remove
			□Add
			□Remove
10. Attached is a certi- of the application under the laws of	ificate or document of similar import, evic to the Department of State, by the Secretary which it is incorporated.	dencing the amendment, authenticated not y of State or otherofficial having custody o	more than 90 days prior to deliver f corporate records in the jurisdiction
	(Signature of a director	r. president or other officer - if in the hand rt appointed fiduciary, by that fiduciary)	s of
Kathleen Scott		rt appointed fiduciary, by that fiduciary) CFO	
(Ty	ped or printed name of person signing)	(Title of pers	on signing)

FILING FEE \$35.00

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID "ARS PHARMACEUTICALS,

INC.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO

"ARS SUBSIDIARY, INC." ON THE SEVENTH DAY OF NOVEMBER, A.D.

2022, AT 2:56 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF

THE AFORESAID CERTIFICATE OF AMENDMENT IS THE EIGHTH DAY OF

NOVEMBER, A.D. 2022 AT 4:01 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF

DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE

EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE

RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT

BUSINESS.



Authentication: 203311391

Date: 05-09-23