

2/22/23, 2:45 PM

Division of Corporations

F2300001106

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 : (954)208-0845
Fax Number : (614)573-3996

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: Lee_kostuk@baxter.com

**FOREIGN PROFIT/NONPROFIT CORPORATION
BAXTER INTERNATIONAL INC.**

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

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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.

1. Baxter International Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Delaware 3. 36-0781620
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 10/19/1931 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. Upon Filing
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. One Baxter Parkway, Deerfield, IL 60015
(Principal office ~~street~~ 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 FL 33324
(City) (Zip code)

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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.

C T Corporation System

By: _____

Jeanne Nelson
(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.

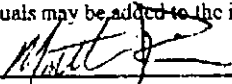
11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

<input type="checkbox"/> Chairman	Name: <u>Jose Almeida</u>	<input type="checkbox"/> Chairman	Name: <u>Cristiano Franzi</u>
<input type="checkbox"/> Vice Chairman	Address: <u>One Baxter parkway, Deerfield, IL 60015</u>	<input type="checkbox"/> Vice Chairman	Address: <u>One Baxter parkway, Deerfield, IL 60015</u>
<input checked="" type="checkbox"/> Director	_____	<input type="checkbox"/> Director	_____
<input type="checkbox"/> President	_____	<input checked="" type="checkbox"/> President	_____
<input type="checkbox"/> Vice President	_____	<input type="checkbox"/> Vice President	_____
<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer	<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Chairman	Name: <u>Steven James Flynn</u>	<input type="checkbox"/> Chairman	Name: <u>Michael F. Mahoney</u>
<input type="checkbox"/> Vice Chairman	Address: <u>One Baxter parkway, Deerfield, IL 60015</u>	<input type="checkbox"/> Vice Chairman	Address: <u>One Baxter parkway, Deerfield, IL 60015</u>
<input type="checkbox"/> Director	_____	<input checked="" type="checkbox"/> Director	_____
<input checked="" type="checkbox"/> President	_____	<input type="checkbox"/> President	_____
<input type="checkbox"/> Vice President	_____	<input type="checkbox"/> Vice President	_____
<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer	<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Chairman	Name: <u>Thomas chen</u>	<input type="checkbox"/> Chairman	Name: <u>Matthew Rice</u>
<input type="checkbox"/> Vice Chairman	Address: <u>One Baxter parkway, Deerfield, IL 60015</u>	<input type="checkbox"/> Vice Chairman	Address: <u>One Baxter parkway, Deerfield, IL 60015</u>
<input checked="" type="checkbox"/> Director	_____	<input type="checkbox"/> Director	_____
<input type="checkbox"/> President	_____	<input type="checkbox"/> President	_____
<input type="checkbox"/> Vice President	_____	<input type="checkbox"/> Vice President	_____
<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer	<input checked="" type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12.



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.

Matthew Rice, Assistant Corporate Secretary

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

Attachment for Officer's and Director's: Baxter International Inc.

Officer's and Director's Address: One Baxter Parkway, Deerfield, IL 60015

Name	Title
Accogli, Giuseppe	Executive Vice President and Chief Operating Officer
Almeida, Jose	Director
Almeida, Jose	Chairman, Chief Executive Officer and President
Borzi, James	Senior Vice President, Chief Supply Chain Officer
Bradford, Ellen K.	Senior Vice President and Corporate Secretary
Chen, Thomas F.	Director
Flynn, Steven James	Senior Vice President and President, APAC
Franzi, Cristiano	Senior Vice President and President, EMEA
Kunzler, Jacqueline	Senior Vice President and Chief Quality Officer
Leets, Karen L.	Senior Vice President and Treasurer
Love, Talvis	Senior Vice President and Chief Information Officer
Mahoney, Michael F.	Director
Mason, Jeanne K.	Senior Vice President, Human Resources
Morrison, Patricia B.	Director
Oesterle, Stephen	Director
Rice, Matthew	Assistant Corp Secretary
Rosenbloom, David S.	Senior Vice President and General Counsel
Saccaro, James K.	Executive Vice President and Chief Financial Officer
Schlichting, Nancy	Director
Shafer, David Brent	Director
Smith, Cathy R.	Director
Stevens, Brian	Senior Vice President, Chief Accounting Officer and Controller
Stroucken, Albert P.L.	Director
Wendell, Amy A.	Director
Wilkes, David S.	Director
Witwer, Peter M.	Director

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BAXTER INTERNATIONAL 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 THIRD DAY OF JANUARY, A.D. 2023.

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.



304913 8300

SR# 20230016133

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: 202410415

Date: 01-03-23