

9/18/24, 8:29 AM

Division of Corporations

Florida Department of State
Division of Corporations
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To:
Division of Corporations
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From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
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: pomalley@regenxbio.com

FOREIGN PROFIT/NONPROFIT CORPORATION
REGENXBIO Inc.

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

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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2024 SEP 18 PM 5:08

Electronic Filing Menu Corporate Filing Menu Help

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. REGENXBIO INC.
(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. Delaware 3. 47-1851754
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 07/16/2008 5. Perpetual
(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. 9804 Medical Center Drive, Rockville, MD 20850-4511
(Principal office street address)
- (Current mailing address, if different)

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

Name: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation FL 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.

SEAN L. EMERICK, ASSISTANT SECRETARY

By: Sean L. Emerick

(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

☒ Chairman Name: Migausky, George
9804 Medical Center drive Rockville
☐ Vice Chairman Address: MD 20850
☐ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other ☐ Other

☐ Chairman Name: Simpson, Curran
9804 Medical Center drive Rockville
☐ Vice Chairman Address: MD 20850
☐ Director
☒ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other ☐ Other

☐ Chairman Name: Vasista, Vittal
☐ Vice Chairman Address: 9804 Medical Center drive Rockville MD 20850
☐ Director
☐ President
☐ Vice President
☐ Secretary ☒ Treasurer
☐ Other ☐ Other

☐ Chairman Name: Mills, Kenneth
9804 Medical Center drive Rockville MD
☐ Vice Chairman Address: 20850
☒ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other ☐ Other

☐ Chairman Name: Zachary, Jennifer
☐ Vice Chairman Address: 9804 Medical Center drive Rockville MD 20850
☒ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other ☐ Other

☐ Chairman Name: Christmas, Patrick
☐ Vice Chairman Address: 9804 Medical Center drive Rockville MD 20850
☐ Director
☐ President
☐ Vice President
☒ Secretary Christmas, Patrick ☐ Treasurer
☐ Other ☐ 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. Vittal Vasista
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. V. + Hal Vasista, CFO Vittal Vasista
(Typed or printed name and capacity of person signing application)

REGENXBIO INC.

Management Structure

ADDRESS: 9804 Medical Center Drive, Rockville, MD 20850-4511

Management Name	Title	Role
Bennett, M.D., Ph.D. Jean	Director	Director
Christmas, Patrick	Secretary	Officer
Fox, Allan M.	Director	Director
Glucksmann, Ph.D. Alexandra	Director	Director
Karabelas, Ph.D. A.N. "Jerry"	Director	Director
Migauskys, George	Director	Director
Mills, Kenneth	Chairman of the Board	Director
Mills, Kenneth	Director	Director
Simoson, Curran	Director	Director
Simpson, Curran	President / CEO	Officer
Stump, M.D. David	Director	Director
Tasse, Daniel	Director	Director
Vas ista, Vittal	Treasurer / CFO	Officer
Zachary, Jennifer	Director	Director

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "REGENXBIO 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 THIRTEENTH DAY OF SEPTEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "REGENXBIO INC." WAS INCORPORATED ON THE SIXTEENTH DAY OF JULY, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



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SR# 20243687272

You may verify this certificate online at corp.delaware.gov/authver.shtmlA 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.

Jeffrey W. Bullock, Secretary of State

Authentication: 204392079

Date: 09-13-24