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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

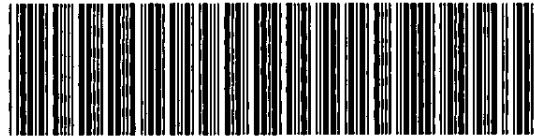
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/01/14--01035--005 **70.00

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2014 MAY 16 AM 10:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 19 2014
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 23, 2014

SUREN AJJARAPU
8913 REGENTS PARK DR., SUITE 680
TAMPA, FL 33647

SUBJECT: WESTMINSTER PHARMACEUTICALS, LLC
Ref. Number: W14000022609

We have received your document for WESTMINSTER PHARMACEUTICALS, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammi Cline
Regulatory Specialist II

Letter Number: 114A00008646

2014 MAY 16 AM 10:42

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 9, 2014

SUREN AJJARAPU
8913 REGENTS PARK DR., SUITE 680
TAMPA, FL 33647

SUBJECT: WESTMINSTER PHARMACEUTICALS, LLC
Ref. Number: W14000022609

2014 MAY 16 AM 10:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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We have received your document for WESTMINSTER PHARMACEUTICALS, LLC and check(s) totaling \$70.00 of which \$70.00 has been designated to file this document. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is an additional amount of \$55.00 due. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammi Cline
Regulatory Specialist II

Letter Number: 214A00007609

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Westminster Pharmaceuticals, LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Suren Ajjarapu
Name of Person

Westminster Pharmaceuticals
Firm/Company

8913 Regents Park Dr. #680
Address

Tampa, FL 33647
City/State and Zip Code

Finance@westminsterrx.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Suren Ajjarapu at (727) 202-4217
Name of Contact Person Area Code Daytime Telephone Number

MAILING ADDRESS:
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 MAY 16 AM 10:43

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**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. Westminster Pharmaceuticals, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware 3. 80-0880011
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

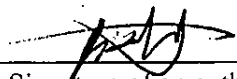
4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 8913 Regents Park Drive, St # 680
Tampa, FL 33647
(Street Address of Principal Office)

6. 17537 Darby Lane
Lutz, FL 33558
(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Suren Aijarapu, Chairman
Prashant Patel, President

8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)


Signature of an authorized person

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any 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.)

Prashant Patel
Typed or printed name of signee

2014 MAY 16 AM 10:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Westminster Pharmaceuticals, LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

Prashant K. Patel, Esq.
(Name)

8913 Regents Park Drive, St 600
Florida Street Address (P.O. Box NOT ACCEPTABLE)


Tampa FL 33647
City/State/Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 MAY 16 AM 10:43

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Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.


(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

Delaware

PAGE 1

The First State


I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WESTMINSTER PHARMACEUTICALS, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SIXTH DAY OF MARCH, A.D. 2014.



5262298 8300

140356827

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


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1240418

DATE: 03-26-14