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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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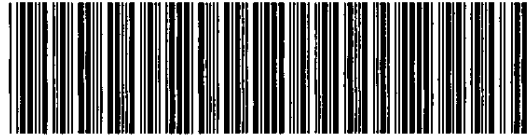
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 31 2015
J. HARRIS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Accumix 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:

Piushbhai Patel

Name of Person

Accumix Pharmaceuticals LLC

Firm/Company

279 Princeton Hightstown Road

Address

East Windsor, NJ 08520

City/State and Zip Code

admin@accumixpharma.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Piushbhai Patel

609

632-222

at ()

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

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

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

1. Accumix 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. New Jersey 3. 47-1212869
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. Not yet commenced
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 279 Princeton Hightstown Rd.
East Windsor, NJ 08520
(Street Address of Principal Office)

6. 279 Princeton Hightstown Rd.
East Windsor, NJ 08520
(Mailing Address)

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

Name: Incorp Services, Inc.
Office Address: 17888 67th Court North
Loxahatchee, Florida 33470
(City) (Zip code)

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.

[Signature] on behalf of Incorp Services, Inc.
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Piushbhai Patel Managing Director 279 Princeton Hightstown Road, East Windsor NJ 08520

Snehal Patel Managing Director 279 Princeton Hightstown Road, East Windsor NJ 08520

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

[Signature]
Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Piushbhai Patel

Typed or printed name of signee

FILED
15 JUL 30 PM 12:45
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
SHORT FORM STANDING**

ACCUMIX PHARMACEUTICALS LLC

0400669467

With the Previous or Alternate Name

ACCUMIX PHARMACEUTICALS (Alternate Name)

OAKDALE PHARMACEUTICALS (Alternate Name)

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on June 27, 2014.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

*Herrick, Feinstein Llp
One Gateway Center
Newark, NJ 07102*



Certification# 136785185

*IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed my
Official Seal at Trenton, this
25th day of June, 2015*

A handwritten signature in black ink, appearing to read "Andrew P. Sidamon-Eristoff".

*Andrew P Sidamon-Eristoff
State Treasurer*

Verify this certificate at
https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp