Florida Department of State

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

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Foreign Limited Liability Company Pharmaco Technology LLC

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1 SHIVERS

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: Pharmaco Technology 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.") California (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) N/A - No business prior to registration (Date first transacted business in Florida, If prior to registration. (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 13727 Noel Road, Tower Π, Suite 200 Dallas, TX 75240 (Street Address of Principal Office) 5850 Canoga Ave, 4th Floor Woodland Hills, CA 91367 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Incorporating Services, Ltd. Name: 1540 Glenway Drive Office Address: Tallahassee (City) Registered agent's acceptance: 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 application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith 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. (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Mark Kim - Sole Owner 13727 Noel Road, Tower II, Suite 200, Dallas, TX 75240 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 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.

Typed or printed name of signee

Mark Kim

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: PHARMACO TECHNOLOGY LLC

FILE NUMBER:

201503710464

FORMATION DATE:

02/04/2015

TYPE: JURISDICTION: DOMESTIC LIMITED LIABILITY COMPANY

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of October 1, 2015.

> ALEX PADILLA Secretary of State

> > MAK