M16000001337

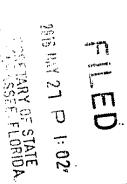
(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
•							
(Document Number)							
,,							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer							
Special Instructions to Filing Officer: 3500)							
need Delawe cert							

Office Use Only



600285522916

05/10/16--01021--004 **125.00



JUN 0 2 2016 WARREN S WASON



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 12, 2016

JUSTIN GOLOVATO 9920 JEFFERSON BOULEVARD CULVER CITY, CA 90232

SUBJECT: NANTOMICS, LLC Ref. Number: W16000035027

We have received your document for NANTOMICS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

Entity is a Delaware entity, we need a Delaware short form good standing certificate, can not use a certificate from another state.,

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.

Stacey M Warren Regulatory Specialist II

Letter Number: 316A00010049

COVER LETTER

TO:	Registra Division	tion Section of Corporation	as				
SUBJE		tOmics LLC					
			Name of	Limited Liability	Company		
The end Existen	closed "Ap	plication by For eck are submitte	eign Limited Liability Comp d to register the above refere	oany for Authoriza enced foreign limi	ation to Tra ted liability	ansact Business in Florida," y y company to transact busine	Certificate of ess in Florida
Please	return all c	orrespondence c	oncerning this matter to the	following:			
		Justin Golovato	•				
			N	ame of Person			
	NantOmics LLC						
Firm/Company							
	9920 Jefferson Blvd.						
Address							
	Culver City, CA 90232						
City/State and Zip Code							
	Culver City, CA 90232 City/State and Zip Code jgolovato@nantomics.com E-mail address: (to be used for future annual report notification)						
	_		E-mail address: (to be used	for future annual	report not	ification)	
For furt	ther inform	ation concerning	g this matter, please call:				
	Justin G	olovato		310 at (853-769	91	
		Name o	f Contact Person	Area Code	Day	time 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				
Enclose		k for the followi 00 Filing Fee	ng amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filir Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Cer 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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	USINESS IN THE STATE OF FLORIDA	4:		
1. NantOmics LLC (Name of For	reign Limited Liability Company; mu	st include "Limited Li	ability Company," "L.L.C	.," or "LLC.")
(If name unavailable, enter a	ulternate name adopted for the purpos	se of transacting busine	ess in Florida. The alterna	te name must include "Limited
Liability Company," "L.L.C	," or "LLC.")	or visionaling vision		io name main monate. Emilion
2. Delaware		3. 46-1036318		
(Jurisdiction under the law company is organized)	of which foreign limited liability		(FEI number, if appli	cable)
4 N/A				
	(Date first transacted busin (See sections 605.0904 & 605	ess in Florida, if prior	to registration.)	
5. 9920 Jefferson Blvd.	Culver City, CA 90232		ne penaley nublicy)	
	(Street Address of	Principal Office)		
6. 9920 Jefferson Blvd. C	Culver City, CA 90232			The second second
				1335
	(Mailing	Address)	·	Ta D
	, -			
7. Name and street addre	ss of Florida registered agent; (P	-		1: 02 LORID
Name:	Greer Jattan - CL/N/(A-L	DIAGNOSTIC	MANAGER.	DE N
Office Address:	11950 Royce Waterford Circle		_	·
	Tampa		, Florida <u>33626</u>	
Registered agent's accep	(City)		(Zip cod	<u>e)</u>
designated in this applicate to complywith the provise	ions of all statutes relative to the my position as registered agent.	tment as registered proper and complet	agent and agree to act te performance of my a	liability company at the place in this capacity. I further agree luties, and I am familiar with and
	/ (Regis	tered agent's signature)	
8. The name, title or cap	acity and address of the person(s)) who has/have autho	ority to manage is/are:	
NA-X	AE:-SHAHROOZ R	ABIZADEH	TITLE :- CHI	EF SCIENTIFIC OFFICE
	9922 JEFFER	SON BLVD	***************************************	
	CULVER CITY	CA 9023	 2_	
		, ,		
	of existence, no more than 90 ds of which it is organized. (If the c ubmitted)			
	Signature	of an authorized person	on	
	d in accordance with section 605.6 o the Department of State constitu			
saominea in a document v	SHAHROO2		• •	5.017.133, P.O.
	SUMMKOUZ	VIOIZMUEN		

Typed or printed name of signee

<u>Delaware</u>

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "NANTOMICS, 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-THIRD DAY OF MAY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NANTOMICS, LLC" WAS FORMED ON THE TWENTIETH DAY OF SEPTEMBER, A.D. 2012.

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

Authentication: 202366401

Date: 05-23-16

5216324 8300 SR# 20163596303