

m17000004328

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

cert W17-39281

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05/04/17--01012--004 **130.00

FILED
17 MAY 19 PM 5:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S Warren

MAY 22 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 8, 2017

JOHN K. WHITING, IV
7309 S. HWY A1A
MELBOURNE BEACH, FL 32951

SUBJECT: INSPIRED THERAPEUTICS LLC
Ref. Number: W17000039281

We have received your document for INSPIRED THERAPEUTICS LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

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: 017A00009058

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Inspired Therapeutics 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:

John K. Whiting, IV

Name of Person

Inspired Therapeutics LLC

Firm/Company

7309 S. Hwy A1A

Address

Melbourne Beach, FL 32951

City/State and Zip Code

jwhitiv@gmail.com

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

For further information concerning this matter, please call:

John K. Whiting, IV

Name of Contact Person

at (**508**)

Area Code

498-3529

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. Inspired Therapeutics 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. 82-1361471
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. May 1, 2017
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 7309 S Hwy A1A
(Street Address of Principal Office)
Melbourne Beach, FL 32951

6. 7309 S Hwy A1A
(Mailing Address)
Melbourne Beach, FL 32951

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

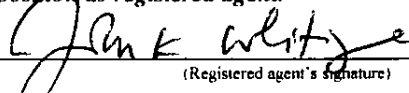
Name: John K. Whiting, IV

Office Address: 7309 S. Hwy A1A

Melbourne Beach, Florida 32951
(City) (Zip code)

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 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.


(Registered agent's signature)

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

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

Manager, President & CEO

Kurt A. Dasse, Ph.D.

Manager, Chief Technology Officer

Barry N. Gellman

15 N. Indian River Drive
Cocoa, FL 32922-4728

6736 Arroyo Dr
Melbourne, FL 32940

Manager, CFO & General Counsel

John K. Whiting, IV

Manager, Dir of Quality and Regulatory Affairs

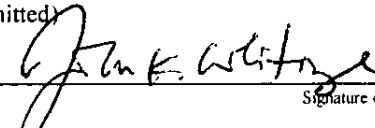
Priscilla Petit

7309 S Hwy A1A
Melbourne Beach, FL 32951-3514

2129 Corner Point Ct
Orlando, FL 32820

(Use attachments if necessary)

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

10. 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.

John K. Whiting, IV

Typed or printed name of signer

FILED
17 MAY 19 PM 5:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INSPIRED THERAPEUTICS 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 NINETEENTH DAY OF APRIL, A.D. 2017.

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



6385004 8300

SR# 20172621477

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

A 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.

Authentication: 202398375

Date: 04-19-17