

M17 000010472

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

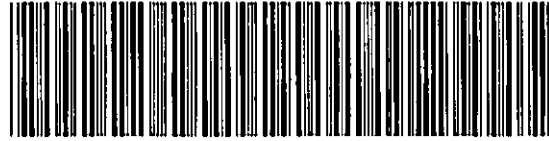
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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17 DEC 11 AM 7:52
CLERK OF STATE
TALLAHASSEE, FLORIDA

AltorBioScience

Altor BioScience Corporation 2810 North Commerce Parkway, Miramar, Florida 33025
Phone: (954) 443-8600 Fax: (954) 443-8610

Maria E. Villacorta
Director of Accounting
2810 N. Commerce Parkway
Miramar, FL 33025
December 8, 2017

Justin M Shivers
Division of Corporations
Registration Section
Clifton Building,
2661 Executive Center Circle
Tallahassee, FL 32301

Dear Justin M Shivers:

This letter certifies that our organization previously known as Altor BioScience Corporation currently operates as Altor BioScience LLC. As such, we are releasing the name to Altor BioScience LLC.

Sincerely,



Maria E. Villacorta
Director of Accounting
Reference Letter: 017A00022096

2017 DEC 11 PM 12:24

MAIL ROOM

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALTOR BIOSCIENCE, 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:

Maria E. Villacorta

Name of Person

ALTOR BIOSCIENCE, LLC

Firm/Company

2810 N. Commerce Parkway

Address

Miramar, FL 33025

City/State and Zip Code

mariavillacorta@altorbioscience.com

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

For further information concerning this matter, please call:

Maria E. Villacorta

954

446-8600 ext 808

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. ALTOR BIOSCIENCE, 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. 30-09997368
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 8/1/2017
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 2810 N. Commerce Parkway 6. 2810 N. Commerce Parkway
(Street Address of Principal Office) (Mailing Address)
Miramar, FL 33025 Miramar, FL 33025

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

Name: NRAI Services, Inc.

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(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.

[Signature]
(Registered agent's signature)

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

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
CEO	Hing C. Wong 2810 N. Commerce Parkway Miramar, FL 33025	CFO	Rick Greene 2810 N. Commerce Parkway Miramar, FL 33025

(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)

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.

[Signature]
Signature of an authorized person

Rick Greene
Typed or printed name of signer


Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ALTOR BIOSCIENCE, 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-SEVENTH DAY OF SEPTEMBER, A.D. 2017.

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


Jeffrey W. Bullock, Secretary of State

6414345 8300

SR# 20176353851

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

Authentication: 203298322

Date: 09-27-17