

*m2 00000488*

Florida Department of State  
Division of Corporations  
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TEVA PHARMACEUTICALS INTERNATIONAL LLC

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2020 JUN 11 PH 1:58

2020 JUN 11 PM 6:58

**STATEMENT OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

2020 JUN 11 11:06:58

**FIRST:** The name of the limited liability company is: Teva Pharmaceuticals International LLC

**SECOND:** The Florida Document number of the limited liability company is: M20000004885

**THIRD:** Document to be corrected is: Foreign Limited Liability Company Authorization to Transact Business in Florida

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)**

Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

Principal Address was listed incorrectly: Principal Address should be corrected to: Schluesselstrasse 12, 8645 Jona, Switzerland

Mailing Address was listed incorrectly: Mailing Address should be corrected to: Schluesselstrasse 12, 8645 Jona, Switzerland

Manager Addresses were listed Incorrectly: Please see corrections on attachment.

**OR**

Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OR**

The electronic transmission of the record was defective.

/s/ Sean Arno

Sean Arno, Attorney-in-Fact

6/11/2020

Signature of Authorized Representative

Date

Signature of new registered agent, if applicable :( NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

**New Registered Agent's Signature, if changing Registered Agent:**

*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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Registered Agent's Signature

**Filing Fee: \$25.00**  
**Certified Copy: \$30.00 (optional)**

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED  
LIABILITY COMPANY

THIRD: Continued

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