## M22000001233

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2022 HAY -6 PH 7: 22

S. FRANKLIN MAY 1 0 2022 Registration Section Division of Corporations

SUBJECT: Real Life Sciences, LLC
Name of Limited Liability Company

The enclosed "Application by Foreign I imited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited hability company to transact business in Unrida

Please return all correspondence concerning this matter to the following: Zimnerman Name of Person e sciences LLC Firm/Company . Swedes for Rd Svite 205 Address Payables @ RLSCIACES. Com
E-mail address: (10 be used for future annual report notification) nor further information concerning this matter, please call: Name of Contact Person Daytime Telephone Number Street Address: Malling Address: Registration Section Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314 Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: FLORIDA DEPARTMENT OF STATE

☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee &

Certificate of Status

s Certified Copy

☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

D \$55.00

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

0.7335#111476.0.000000	IN FLORIDA
COMMAN TO THE STATE STATES IN THE STATE OF FLORIDA	THE FOLLOWING IS SCHWITTED TO REGISTER A FORESTS. LIMITED LABBUT
RLS, LLC	Limited Enability Company "T. L. C.," or "T. C."
	ess in Floride. The objection mans must include Armited Floribity Company," A A Color (EU) a
Delavare	, 47-4138057
Delavare	d) (FEI number, if applicable)
January 1, 2021	
(Date ties) transacted business in Florida if a (See sections 605 0904 & 605 0905; F.S. to	prior to registration ) determine penalty hability)
5. 565 E. Swadesford Rd	6. 565 E. Swedsford Rd
Suite 205	Suite 205
Wayne, PA 19087	Wayne PA 19087
7. Name and street address of Florida registered agent: (P.O.	Box NOT acceptable)
7. Name and Mitty addity	> .
Corporation Service	Company
Name:	<del></del>
Office Address: 1201 HATS ST.	PA
Talk hassee	3 23° = 7
(Cas)	. Florida
Registered agent's acceptance:	
Having been named as registered agent and to accept service designated in this application. I hereby accept the appointment	of process for the above stated limited liability company at the place at as registered agent and agree to act in this capacity. I further agree
to comply with the provisions of all statutes relative to the pro	per and complete performance of my duties, and I am familiar with
and accept the obligations of my position as registered agent.	

Lynn M. Carne Longo Lynn M. Came Longo, AVP (Registered agent y signature)

for mittal indexing purposes. Fist names, tute or capacity and addresses of the primary members/managers or persons authorized to most o six (0) totall: panege Jup to six (6) total]: nle or Capacity: Title or Capacity: Name and Address: Kamise □Manager \_Member Krember TAuthorized ClAuthorized Person Person Other. □ Other Other\_ COther, Name: Joldan □Manager □ Manager **X**Member Member □ Authorized D'Authorized Warne Person Person []Other\_ O0ther\_ □ Other\_ □ Other □ Manager □Manager □Member Address: \_ □ Member Authorized □Authorized Person Person Other\_ DOther, TOther\_

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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 of an authorized person

Typed or printed name of signer

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "REAL LIFE SCIENCES, 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 SIXTEENTH DAY OF FEBRUARY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "REAL LIFE SCIENCES, LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF MAY, A.D. 2015.

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

Authentication: 202680701

Date: 02-16-22



March 10, 2022

ELLIOT ZIMMERMAN 565 E SWEDESFORD RD STE 205 WAYNE, PA 19087 US

SUBJECT: REAL LIFE SCIENCES, LLC Ref. Number: W22000031516

We have received your document for REAL LIFE SCIENCES, LLC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a foreign corporation, but your entity is a foreign limited liablity company. Please complete and return the enclosed blank form(s).

There is a balance due of \$55.00.

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.

Sharon D Franklin Regulatory Specialist II

Letter Number: 322A00005789

