2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # P98000067144 Aug 22, 2000 8:00 am Secretary of State 1. Entity Name PROCIDA CORPORATION 08-22-2000 90223 022 ***550.00 Principal Place of Business Mailing Address C/O ROGERS & WELLS LLP C/O ROGERS & WELLS LLP 200 PARK AVENUE 200 PARK AVENUE NEW YORK NY 10166 NEW YORK NY 10166 EYUPYUUA 2. Principal Place of Business Rogers & Wells 3. Mailing Address Clifford Chance Regers & Wells Suite, Apt. #, etc Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FE! Number 13-4018844 Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TIT) F TITLE Change ☐ Addition ☐ Delete NAME ROTHFELDT, MAGDALENA S NAME STREET ADDRESS STREET ADDRESS 481 S MASHTA DRIVE CITY-ST-ZIP CITY-ST-ZIP **KEY BISCAYNE FL 33149** ☐ Change ☐ Addition ☐ Delete TITLE ROTHFELDT, MARC NAME NAME STREET ADDRESS STREET ADDRESS 481 S MASHTA DRIVE CITY-ST-7IP CITY-ST-ZIP **KEY BISCAYNE FL 33149** TITLE Change _ 🛄 Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

CLIFFORD CHANCE Attachment Doc#
P98 0006744

CLIFFORD CHANCE FOR THOTH

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Hagar L. Riley Paralegal

DIRECT TEL 212 878 8478 DIRECT FAX 212 878 8375 hagar.riley@cliffordchance.com

August 18, 2000

VIA CERTIFIED MAIL RETURN RECEIPT REQUESTED Article No. 7099 3400 0001 8604 5154

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 23202-1500

Re: Filing Fee for the Procida Corporation

Dear Sir or Madam:

Enclosed please find a check for \$550.00 to cover the cost of the filing fee for the 2000 Uniform Business Report of the Procida Corporation.

I have also enclosed a copy of this letter which I would ask you to stamp "received" and return to me in the self-addressed stamped envelope that I have provided.

Thank you for your prompt attention to this matter. Please feel free to call me if you have any questions.

Sincerely,

Haga(L.)Riley

enclosures

cc: Mr. & Mrs. Marc Rothfeldt John D. Dadakis, Esq. Scott Jacobs, Esq.

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ROGERS & WELLS

attachment Doc # p98'000067144

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