

**2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M11000004721

**Entity Name:** MALLINCKRODT LLC

**Current Principal Place of Business:**

675 MCDONNELL BOULEVARD  
HAZELWOOD, MO 63042

**Current Mailing Address:**

675 MCDONNELL BOULEVARD  
HAZELWOOD, MO 63042 US

**FEI Number:** 43-1479062

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           KILPER, JEFF J.  
Address        675 MCDONNELL BOULEVARD  
City-State-Zip: HAZELWOOD MO 63042

Title           MANAGER  
Name           CASEY, MARK  
Address        675 MCDONNELL BOULEVARD  
City-State-Zip: HAZELWOOD MO 63042

Title           MANAGER  
Name           PONCIROLI, CATHI M.  
Address        675 MCDONNELL BOULEVARD  
City-State-Zip: HAZELWOOD MO 63042

Title           MANAGER  
Name           WELCH, STEPHEN A.  
Address        675 MCDONNELL BOULEVARD  
City-State-Zip: HAZELWOOD MO 63042

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PONCIROLI , CATHI M.

**MANAGER**

**04/29/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date