

2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M19000011331

Entity Name: NALPROPION PHARMACEUTICALS LLC

Current Principal Place of Business:

10 NORTH PARK PLACE, SUITE 201
MORRISTOWN, NJ 07960

Current Mailing Address:

10 NORTH PARK PLACE, SUITE 201
MORRISTOWN, NJ 07960 US

FEI Number: 82-5338324

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 MBR
Name CURRAX PHARMACEUTICALS LLC
Address 10 NORTH PARK PLACE, SUITE 201
City-State-Zip: MORRISTOWN NJ 07960

Title AUTHORIZED REPRESENTATIVE
Name TOOMAN, ERIKA
Address 10 NORTH PARK PLACE, SUITE 201
City-State-Zip: MORRISTOWN NJ 07960

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: ERIKA TOOMAN

AUTHORIZED PERSON

04/12/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date