

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000000427

Entity Name: INDIVIOR INC.**Current Principal Place of Business:**10710 MIDLOTHIAN TURNPIKE
SUITE 430
NORTH CHESTERFIELD, VA 23235**Current Mailing Address:**10710 MIDLOTHIAN TURNPIKE
SUITE 430
NORTH CHESTERFIELD, VA 23235 US**FEI Number:** 52-2069631**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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**Officer/Director Detail :**

Title	SECRETARY
Name	DUVAL, NANCY
Address	10710 MIDLOTHIAN TURNPIKE SUITE 430
City-State-Zip:	RICHMOND VA 23235

Title	DIRECTOR
Name	RODRIGUEZ, JAVIER
Address	10710 MIDLOTHIAN TURNPIKE SUITE 430
City-State-Zip:	RICHMOND VA 23235

Title	DIRECTOR, PRESIDENT
Name	SIMKIN, RICHARD
Address	10710 MIDLOTHIAN TURNPIKE SUITE 430
City-State-Zip:	RICHMOND VA 23235

Title	DIRECTOR
Name	THAXTER, SHAUN
Address	10710 MIDLOTHIAN TURNPIKE SUITE 430
City-State-Zip:	RICHMOND VA 23235

Title	TREASURER
Name	PREBLICK, RYAN
Address	10710 MIDLOTHIAN TURNPIKE SUITE 430
City-State-Zip:	RICHMOND VA 23235

Title	ASSISTANT TREASURER
Name	COCO, CYNTHIA LOUISE
Address	10710 MIDLOTHIAN TURNPIKE SUITE 430
City-State-Zip:	RICHMOND VA 23235

Title	DIRECTOR
Name	CROSSLEY, MARK
Address	10710 MIDLOTHIAN TURNPIKE SUITE 430
City-State-Zip:	RICHMOND VA 23235

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 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 above, or on an attachment with all other like empowered.

SIGNATURE: NANCY DUVAL**SECRETARY****01/09/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date