# F05000001995

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### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Synthon Pharmaceutica	als, Inc.		
(N	ame of corporation	on - must include suffix)	•
Dear Sir or Madam:			
The enclosed "Application by Foreign "Certificate of Existence", and check transact business in Florida.			
Please return all correspondence conce	erning this matte	r to the following:	2005
Gregory Pate			
	(Name o	f Person)	是年 28 5
Synthon Pharmaceuticals, Inc.			
	(Firm/Co	ompany)	K KO K
9000 Development Drive, PO Box 110	0487		
	(Add	ress)	502
Research Triangle Park, NC 27709			<i>Y</i> ( <i>y</i> )
	(City/State	and Zip code)	
	` -	. ,	
For further information concerning thi	s matter, please	call:	
Greg Pate	at (919	) 493-6006	
(Name of Person)		Code & Daytime Telepho	one Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399		MAILING ADDRESS Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	ns
Enclosed is a check for the following	amount:		
<b>№</b> \$70.00 Filing Fee <b> ₹</b> \$78.75 Fi		3 \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

#### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. • 3	armaceuticals, Inc.		<u> </u>
	f corporation; must include "INCORPORAT Corp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"  adopted for the purpose of transacting business in Florida  56-202-8789  (FEL number, if applicable)
N/A			
(If name unav	illable in Florida, enter alternate corporate n	ame	adopted for the purpose of transacting business in Florida)
North Carolin	na	3.	56-202-8789
(State or count	ry under the law of which it is incorporated)	_	(FEI number, if applicable)
i. May 14, 199	7	5.	Perpetual
(Da	ate of incorporation)	-	(Duration: Year corp. will cease to exist or "perpetual")
March 1, 200	15		
	(SEE SECTIONS 607.)	1501	transacted business in Florida, insert "upon qualification."), 607.1502 and 817.155, F.S.)
9000 Develor	oment Drive, Research Triangle Park, No		
	(Principal office		
PO Box 1104	87, Research Triangle Park, NC 27709 (		
	(Current mailing	; addi	ress)
to angage in	any lawful business		
to chigage in			
	e(s) of corporation authorized in home state	or co	ountry to be carried out in state of Florida)
(Purpose	•		
(Purpose	reet address of Florida registered age		(P.O. Box or Mail Drop Box NOT acceptable)
(Purpose	•		
(Purpose . Name and st Name:	reet address of Florida registered age		
(Purpose)  Name and st  Name:	nreet address of Florida registered age		

further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

NRAI Services, Inc.

- 11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.
- 12. Names and business addresses of officers and/or directors:

A. DIRECTORS
Chairman: Jacques M. Lemmens
Address: PO Box 7071
6503 GN Nijmegen, The Netherlands
Vice Chairman: N/A
Address: N/A
Director: Jacques M. Lemmens
Address: PO Box 7071
6503 GN Nijmegen, The Netherlands
Director: N/A
Address: N/A
N/A SQ
B. OFFICERS
President: Vacant
Address: N/A
N/A
Vice President: Michael H. Hinckle
Address: 9000 Development Drive, PO Box 110487
Research Triangle Park, NC 27709
Secretary: Michael H. Hinckle
Address: 9000 Development Drive, PO Box 110487, Research Triangle Park, NC 27709
Treasurer: N/A
Address:
NOTE TO THE PARTY OF THE PARTY
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
(Signature of Director or Officer listed in number 12 of the application)
Michael H. Hinckle, Vice President and General Counsel

(Typed or printed name and capacity of person signing application)

#### SYNTHON PHARMACEUTICALS, INC.

#### **Directors**

<u>Directors</u>						
Name 1.) Dr. Jacques M. Lemmens		Business Address 22 Microweg 6545 CM Nijmegen The Netherlands	Effective Date May 13, 1997			
	The Contraction of the Contracti					
r	Offi					
<u>Name</u>	<u>Title</u>	Business Address	Effective Date			
1.) Jacques M. Lemmens	CEO, Chairman of the Board	22 Microweg 6545 CM Nijmegen The Netherlands Tel.: +31243727700	May 13, 1997			
2.) Peter van Straelen	President	9000 Development Drive PO Box 110487 Research Triangle Park, NC 27709 Tel.: (919) 493-6006	March 10, 2005			
3.) Michael H. Hinckle	Vice President Secretary General Counsel	9000 Development Drive PO Box 110487 Research Triangle Park, NC 27709 Tel.: (919) 493-6006	April 8, 2004			
4.) W. Wayne Stargel	Vice President of Medical Affairs	9000 Development Drive PO Box 110487 Research Triangle Park, NC 27709 Tel.: (919) 493-6006	April 8, 2004			
5.) Dilip Parikh	Vice President of Manufacturing and Operations	9000 Development Drive PO Box 110487 Research Triangle Park, NC 27709 Tel.: (919) 493-6006	April 8, 2004			
6.) Andrew Shales	Vice President of Sales and Marketing	9000 Development Drive PO Box 110487 Research Triangle Park, NC 27709 Tel.: (919) 493-6006	April 8, 2004			



## NORTH CAROLINA Department of The Secretary of State

#### CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

#### SYNTHON PHARMACEUTICALS, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 14th day of May, 1997, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 18th day of March, 2005

Secretary of State

6 laine I Marshall