Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

: (850)222-1092

Fax Number

: (850)878-5926

FOREIGN PROFIT/NONPROFIT CORPORATIO

**BOC Edwards Pharmaceutical Systems, Inc.** 

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Corporate Filing Menu

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# TRANSMITTAL LETTER

TO: Registration Section			
Division of Corpora			
SUBJECT: BOCEDWAR			
	(Name of corporation	on - must include suffix)	
Dear Sir or Madam:			
The enclosed "Application I "Certificate of Existence," a transact business in Florida.			
Please return all correspond	ence concerning this matter	to the following:	•
	JAN BOR	Kowski	<u> </u>
	(Nation o	•	_ <del>-</del>
	CO BOC ED	wards Pharmag	eutical systems, inc
	(Firm/Co	ompany)	
	575 MOU!	STAIN AVENUE,	4 SOUTH
	(Add	ress)	
	MURRAY	HILL, NEWJER	sey 07974
	(City/State	and Zip code)	•
For further information con	perning this matter, please	call:	
JAN BORKO	USKI at ( 90)	3 771-4742	
(Name of Person)	(Area	3 ) <u>171-474</u> 2. Code & Daytime Telepho	one Number)
			•
STREET ADDRE Registration Section Division of Corpor 409 B. Gaines St. Tallahassen, FL 32	n acions	MAILING AI Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7
Enclosed is a check for the	fellowing amount:		
質 \$70.00 Filing Fee C	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	[] \$87.50 Filing Fee, Certificate of Status & Certified Copy

	WITH SECTION 607.1503, FLORID. EIGN CORPORATION TO TRANSAC				50 O
BOC EDWARD	s Pharmaceutical systems, inc	<b>.</b>			
(Bater name of co	rporation; must include "TNCORPORAT ap," "Inc," "Co," or "Corp.")		"COMPA	ny," "corporation,"	#B-8 #
(If name unavaila	ble in Florida, enter alternate corporate n	m¢	scopted for	the purpose of transacting business in l	Florida)
2 Delaware		3	20-326511	2	일등 (
	under the law of which it is incorporated)			(FEI number, if applicable)	<u> </u>
4. 08/02/2005		<b>5</b> .	Perpetual	•	
(Date	of incorporation)		(Duration:	Year corp. will occuse to exist or "perp	ectoei")
6. Upon Qualificati	on				
	(Date first transacted busine (SEE SECTIONS 607.1501 & 60				<del></del>
7.373 Modificatio A.M.	nue, Murray Hill, NJ 07974 (Principal office	add	7856)		<del></del>
erro <del>c</del>	A succession of the succession		,		
22110	(Current mailing	add	tress)		<del>,</del>
	•		•		
8. See Attachment					
(Purpose(s	) of corporation authorized in home state	OK ¢	cumtry to be	carried out in state of Florida)	
9. Name and stree	t siddress of Florida registered agent:	(P.K	D. Box <u>NO</u>	T_acceptable)	
Name:	C T Corporation System				
Office Address:	1200 South Pine Island Road				
	Plantation		Flo	rida <u>33324</u>	
	(City)			(Zîp code)	
Having been nam designated in this further agree to c and I am familian	gent's secreptance: led as registered agent and to accept application, I hereby accept the application, I hereby accept the applications of all status with and accept the obligations of more than accept the obligations of	oint tes ty p	ment as represent to to state of the control of the	distered agent and agree to act in the proper and complete performative distered agent.  ene Bernal President	his capacity. I nce of my duties, to application to

Chalman: SEE ATTACHMENT  Address:  Vice Chalman: Address:  Director: Address:  Director: Address:  X. OFFICERS  President: SEE ATTACHMENT  Address:  Vice President: Address:  Vice President:  Secretary: Address:  NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.  13. (Signature of Director or Officer listed in number 12 of the application)  14. THE OFFICER IN THE SEE IDENT  (Threed or primed manue and canadive of necessaries are suring a sociliation)	A. DIRECTORS
Vice Chairman:  Address:  Director:  Address:  Director:  Address:  B. OFFICERS  President: SEE ATTACHMENT  Address:  Vice President:  Secretary:  Address:  Treasurer:  Address:  NOTE: If necessary, you may stack an addendum to the application listing additional officers and/or directors.  (Signature of Director or Officer listed in number 12 of the application)  14. TOHN CISUMMAN MICE CRESS DEATT	Chairman: SEE ATTACHMENT
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(Signature of Director or Officer listed in number 12 of the application)  14. TOHN O'SKILLIVAN VICE PRESIDENT	
14. JOHN O'SULLIVAN VICE PRESIDENT	
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Attachment

Page 1 of 1

Attachment to Florida

Purpose Clause

The manufacture and/or sale of equipment for, and the provision of services to, the pharmaceutical industry.

# BOC EDWARDS PHARMACEUTICAL SYSTEMS, INC. (a Delaware corporation)

8502227615

## INCORPORATED August 2, 2005

### FEIN 20-3265112

DIRECTORS – (addresses below)
Michael Jannings
Ernesto Renzi
John O'Sullivan
James Blake – c/o BOC Edwards Pharmaceutical Systems, Inc., 575 Mountain Avenue, Murray Hill, NJ 07974

President

#### **OFFICERS**

Michael Jennings c/o BOC Edwards Pharmaceutical Systems, Inc. 575 Mountain Avenue Murray Hill, NJ 07974 Emceto Renzi c/o BOC Edwards Pharmaceutical Systems, Inc. 575 Mountain Avenue Murray Hill, NJ 07974 John O'Sullivan c/o BOC Edwards Pharmaceutical Systems, Inc. 575 Mountain Avenue Murray Hill, NJ 07974 David L. Brooks c/o BOC Edwards Pharmaceutical Systems, Inc. 575 Mountain Avenue Murray Hill, NJ 07974 James A. Boyce c/o BOC Edwards Pharmacoutical Systems, Inc. 575 Mountain Avenue Murray Hill, NJ 07974 John P. Mark c/o BOC Edwards Pharmaceutical Systems, Inc. 575 Mountain Avenue Murray Hill, NJ 07974 James A. Snyder c/o BOC Edwards Pharmaceutical Systems, Inc. 575 Mountain Avenue Murray Hill, NJ 07974 Paul E. Stolzer c/o BOC Edwards Pharmaceutical Systems, Inc. 575 Mountain Avenue

Vice President - Sales

Vice President, Finance

Vice President and Treasurer

Assistant Treasurer and Controller - Taxes

Secretary

Assistant Secretary

Murray Hill, NJ 07974



DAGE

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BOC EDWARDS PHARMACEUTICAL SYSTEMS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTH DAY OF MARCH, A.D. 2006.

AND I DO HEREBY FORTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAKES HAVE BEEN PAID TO DATE.

4009378 8300 060219935 Harriet Smith Windson Secretary of State

urie: Smith Windsor, Secretary of State
AUTRENTICATION: 4570601

DATE: 03-06-06