

7500884810

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

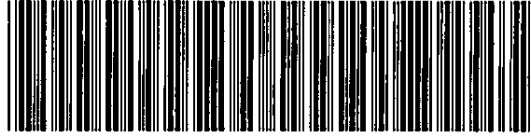
(Document Number)

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Special Instructions to Filing Officer:

W15-66105
6540

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200277334742

10/02/15--01021--011 **87.50

11/02/15--01001--007 **745.00

OCT 30 2015
S. YOUNG
FILED
15 OCT -2 PM 3:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 5, 2015

MEGAN BECKER
1031 CENTENNIAL AVENUE
PISCATAWAY, NJ 08854

SUBJECT: CAMBER PHARMACEUTICALS INC
Ref. Number: W15000066105

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TALLAHASSEE, FLORIDA

We have received your document for CAMBER PHARMACEUTICALS INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$745.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young
Regulatory Specialist II

Letter Number: 215A00021036

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Camber Pharmaceuticals, Inc.
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Pravin Pillai | Megan Becker
Name of Person

Camber Pharmaceuticals, Inc.
Firm/Company

1031 Centennial Ave
Address

Piscataway, NJ 08854
City/State and Zip code

ppillai@camberpharma.com
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Pravin Pillai at (732) 529 0430 ext. 424.
Name of Person Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$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. Camber Pharmaceuticals, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. DE 3. 20-8517493
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 2007 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)

6. July 19, 2011
(Date first transacted business in Florida; if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1031 Centennial Ave, Piscataway, NJ 08854
(Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CT Corporation System
Office Address: 1200 S Pine Island Rd
Plantation, Florida 33324
(City) (Zip code)

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9. Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I 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.

Ausma Amel Assistant Secretary
(Registered agent's signature)

10. 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.

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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B. OFFICERS

President: Kon Ostaficiuk

Address: 1031 Centennial Ave, Piscataway, NJ 08854

Director: Director of Finance - Pravin Pillai
~~Vice President:~~

Address: "same as above"

Director: Director of Marketing - Kirk Hessels
~~Secretary:~~

Address: "same as above"

Director: Director of Sales Operations - Ed Smith
~~Treasurer:~~

Address: "same as above"

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. Kon Ostaficiuk
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Kon Ostaficiuk
(Typed or printed name and capacity of person signing application)

**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
SHORT FORM STANDING**

CAMBER PHARMACEUTICALS INC

0400177678

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named Delaware Foreign Profit Corporation was registered by this office on April 26, 2007.

As of the date of this certificate, said business continues as an active business in the State of New Jersey. Annual Reports are outstanding for the following year(s):

2015

I further certify that the registered agent and registered office are:

*Camber Pharmaceuticals Inc.
1031 Centennial Avenue
Piscataway, NJ 08854*

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TALLAHASSEE, FLORIDA



Certification# 137236570

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 10th day of September, 2015

Robert A. Romano

Robert A Romano
Acting State Treasurer

Verify this certificate at
https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp