



NORTH CAROLINA

Department of The Secretary of State

CERTIFICATE OF AUTHORITY

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

VRTX, INC.

having filed on this date an application conforming to the requirements of the General Statutes of North Carolina, a copy of which is hereto attached, is hereby granted authority to transact business in the State of North Carolina.



IN WITNESS WHEREOF, I have hereunto
set my hand and affixed my official seal at the
City of Raleigh, this 20th day of September, 2007

Elaine F. Marshall

Secretary of State

State of North Carolina
Department of the Secretary of State

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Elaine F. Marshall
North Carolina Secretary of State
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APPLICATION FOR CERTIFICATE OF AUTHORITY

Pursuant to §55-15-03 of the General Statutes of North Carolina, the undersigned corporation hereby applies for a Certificate of Authority to transact business in the State of North Carolina, and for that purpose submits the following:

1. The name of the corporation is VRTX, INC.; and if the corporate name is unavailable for use in the State of North Carolina, the name the corporation wishes to use is: _____

2. The state or country under whose laws the corporation was organized is: Georgia

3. The date of incorporation was 6/12/96; its period of duration is: perpetual

4. Principal office information: (Select either a or b.)

a. ☒ The corporation has a principal office.

The street address and county of the principal office of the corporation is:

Number and Street 1204 Springwood Ave.

City, State, Zip Code Gibsonville, NC 27215 County Guilford

The mailing address, if different from the street address, of the principal office of the corporation is: _____

b. ☐ The corporation does not have a principal office.

5. The street address and county of the registered office in the State of North Carolina is:

Number and Street 1204 Springwood Ave

City, State, Zip Code Gibsonville, NC 27215 County Guilford

6. The mailing address, if different from the street address, of the registered office in the State of North Carolina is: _____

7. The name of the registered agent in the State of North Carolina is: Claude Simon

8. The names, titles, and usual business addresses of the current officers of the corporation are (attach if necessary):

Name	Title	Business Address
<u>Claude Simon</u>	<u>President</u>	<u>1204 Springwood Ave., Gibsonville</u>
		<u>NC 27215</u>

9. Attached is a Certificate of Existence (or document of similar import) duly authenticated by the Secretary of State or other official having custody of corporate records in the state or country of incorporation. The Certificate of Existence must be an original and less than six months old.

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10. If the corporation is required to use a fictitious name in order to transact business in this State, a copy of the resolution of its board of directors, certified by its secretary, adopting the fictitious name is attached.

11. This application will be effective upon filing, unless a delayed date and/or time is specified: _____

This is the 13th day of September, 2007

VRTX, INC.

Name of Corporation,

Claude Simon

Signature

Claude Simon, President

Type or Print Name and Title

NOTES:

1. Filing fee is \$250. This document must be filed with the Secretary of State.

CORPORATIONS DIVISION
(Revised January, 2002)

P. O. BOX 29622

RALEIGH, NC 27626-0622
(Form B-09)