

Filing and License Fee: \$310.00 minimum

ID Number: _____



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

BUSINESS CORPORATION

APPLICATION FOR CERTIFICATE OF AUTHORITY

Pursuant to the provisions of Section 7-1.2-1405 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement:

1. The name of the corporation is Allergan USA, Inc.
2. It is incorporated under the laws of Delaware
3. The name, if different, which it elects to use in Rhode Island is:

(a) *If the name of the corporation in its jurisdiction of incorporation does not contain the word "corporation," "company," "incorporated," or "limited," or an abbreviation thereof, then list the name of the corporation with the addition of one of the above corporate endings for use in Rhode Island:*

(b) *If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application:*

4. The date of its incorporation is November 05, 2004 and the period of its duration is Perpetual
5. The address of its principal office in the state or country under the laws of which it is incorporated is _____
c/o Corporation Service Company, Suite 400, 2711 Centerville Road, Wilmington, DE 19808
6. The address of its proposed registered office in Rhode Island is 222 Jefferson Boulevard, Suite 200
(Street Address, not P.O. Box)
Warwick, RI 02888 and the name of its proposed registered agent in Rhode Island at
(City/Town) (Zip Code)
that address is Corporation Service Company
(Name of Agent)

7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:
Manufacture, sales and distribution of eye care and specialty pharmaceutical products. To engage in any act or activity for which corporations may be organized.

8. (a) The names and respective addresses of its directors (optional unless directors are required under the laws of the state or country of which it is incorporated).

	<u>Name</u>	<u>Address</u>
Director	<u>See attached officers/directors rider</u>	
Director		
Director		
Director		

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- (b) The names and respective addresses of its principal officers (mandatory if directors are not required under the laws of the state or country of which it is incorporated).

	<u>Name</u>	<u>Address</u>
President	See attached officers/directors rider	
Vice President		
Treasurer		
Secretary		

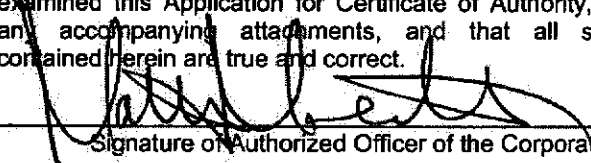
9. The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value or Statement that Shares are without Par Value</u>
100	Common		\$0.001

10. (a) An estimate of the value of all property to be owned by the corporation for the following year, wherever located, is \$ 0.00 .
- (b) An estimate of the value of the corporation's property to be located within Rhode Island during the following year is \$ 0.00 .
- (c) An estimate, expressed as a percentage, of the proportion that the estimated value of the property of the corporation to be located within this state during the following year bears to the value of all property of the corporation to be owned during the following year, wherever located, is _____ %. [divide (b) by (a) and multiply by 100 to obtain the percentage].
11. (a) An estimate of the gross amount of business to be transacted by the corporation during the following year is \$ 0 .
- (b) An estimate of the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year is \$ 0 .
- (c) An estimate, expressed as a percentage, of the proportion that the gross amount of business to be transacted by the corporation at or from places of business in this state during the following year bears to the gross amount thereof which will be transacted by the corporation during the following year is _____ % [divide (b) by (a) and multiply by 100 to obtain the percentage].
12. This application is accompanied by a certificate of Good Standing issued by the proper officer of the state or country under the laws of which it is incorporated.
13. This Application for Certificate of Authority shall be effective upon filing unless a specified date is provided which shall be no later than the 90th day after the date of this filing _____

Under penalty of perjury, I declare and affirm that I have examined this Application for Certificate of Authority, including any accompanying attachments, and that all statements contained herein are true and correct.

Date: July 1, 2008


Signature of Authorized Officer of the Corporation

Matthew J. Maletta, Assistant Secretary

Type or Print Name of Authorized Officer

OFFICERS/DIRECTORS RIDER

RI-Application for Certificate of Authority

Allergan USA, Inc.

List of Officers

Name: David E.I. Pyott Bus. Addr.: 2525 Dupont Drive, Irvine, CA 92612	Title: Chief Executive Officer
Name: F. Michael Ball Bus. Addr.: 2525 Dupont Drive, Irvine, CA 92612	Title: President
Name: Jeffrey L. Edwards Bus. Addr.: 2525 Dupont Drive, Irvine, CA 92612	Title: VP & Chief Financial Officer
Name: Douglas S. Ingram Bus. Addr.: 2525 Dupont Drive, Irvine, CA 92612	Title: Vice President & Secretary
Name: James M. Hindman Bus. Addr.: 2525 Dupont Drive, Irvine, CA 92612	Title: Vice President & Treasurer
Name: James F. Barlow Bus. Addr.: 2525 Dupont Drive, Irvine, CA 92612	Title: Vice President & Controller
Name: Terilea J. Wielenga Bus. Addr.: 2525 Dupont Drive, Irvine, CA 92612	Title: Vice President, Tax
Name: Matthew J. Maletta Bus. Addr.: 2525 Dupont Drive, Irvine, CA 92612	Title: VP & Assistant Secretary
Name: Julian S. Gangolli Bus. Addr.: 2525 Dupont Drive, Irvine, CA 92612	Title: Vice President
Name: Robert E. Grant Bus. Addr.: 2525 Dupont Drive, Irvine, CA 92612	Title: Vice President
Name: David Lawrence Bus. Addr.: 2525 Dupont Drive, Irvine, CA 92612	Title: Vice President
Name: Gary A. Prem Bus. Addr.: 2525 Dupont Drive, Irvine, CA 92612	Title: Assistant Treasurer
Name: Martin A. Voet Bus. Addr.: 2525 Dupont Drive, Irvine, CA 92612	Title: Assistant Secretary

List of Directors

Name: David E.I. Pyott Bus. Addr.: 2525 Dupont Drive, Irvine, CA 92612	Term:
Name: Jeffrey L. Edwards Bus. Addr.: 2525 Dupont Drive, Irvine, CA 92612	Term:
Name: Douglas S. Ingram Bus. Addr.: 2525 Dupont Drive, Irvine, CA 92612	Term:

Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ALLERGAN USA, 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 FIRST DAY OF JULY, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ALLERGAN USA, INC." WAS INCORPORATED ON THE FIFTH DAY OF NOVEMBER, A.D. 2004.

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

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

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Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6702366

DATE: 07-01-08



State of Rhode Island and Providence Plantations

A. Ralph Mollis

Secretary of State

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island
and Providence Plantations, hereby certify that this document, duly
executed in accordance with the provisions of Title 7 of the General Laws
of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

Secretary of State

