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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year:	Amended 2016	
Limited Liability Company		

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→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number	2. Exact name of the Limited Liability Company					
000794325	United Biologics, LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
81 - Other Services (except Pi	HEALTHCARE SERVICES					
5. State of Formation						
Delaware			. <u></u>			
3. Principal Office Address			City	State	Zip	
70 NE Loop 410, Suite 600			San Antonio	TX	78216	
7. Mailing Address of Limited Lia	bility Company	and Name or Tit	le of Contact Person			
Contact Name Richard R. Lewis			Contact Title Manager, CFO			
Street Address 70 NE Loop 410, Suite 600			City San Antonio	State TX	^{Zip} 78216	
8. List ALL managers (names ar	nd addresses)	of the Limited Lia	bility Company, IF APPLICAE	BLE - DO NOT LIST N	MEMBERS	
Manager Name Richard R. Lewis			Manager Name			
Street Address 70 NE Loop 410, Suite 600		Street Address				
City San Antonio	State TX	Zip 78216	City	State	Zip	
Manager Name Manager Name						
Street Address			Street Address			
City	State	Zip	City	State	Zip	
	<u> </u>	<u></u>		Check the box to i	ndicate an attachment	
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.						
9. Resident Agent in Rhode Isla Under penalty of perjury, I dec	no. I his informa	m that I have eve	amined this report, includir	ng any accompanyin	g schedules and	
Under penalty of perjury, I dec statements, and that all stater	nents contain	ed herein are tru	ie and correct.			
Name of Authorized Person			Date			
Susan McCraney			11/22/2	11/22/2016		
Signature of Authorized Person	16 Cranes	SIGN D	OCUMENT HERE			

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov **FILED**

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FORM 632 - Revised: 08/2016