

STATE OF DELAWARE
DIVISION OF PROFESSIONAL REGULATION

CANNON BUILDING
861 SILVER LAKE BLVD., SUITE 203
DOVER, DELAWARE 19904-2467

PROFESSIONAL LICENSE

PROFESSION: Pharmacy
LICENSE TYPE: Pharmacy - Wholesale
LICENSE NUMBER: A4-0002341
LICENSE STATUS: Active
ISSUE DATE: 09/19/2016
EXPIRATION DATE: 09/30/2028
ISSUED TO: BluPax Pharmaceuticals, LLC

PHYSICAL ADDRESS: 160 RARITAN
CENTER PARKWAY
UNIT 1,
EDISON NJ 08837

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SIGNATURE: _____

THIS CERTIFIES THAT THE PERSON NAMED IS HEREBY LICENSED TO
CONDUCT OR ENGAGE IN THE PROFESSION INDICATED ABOVE.
THIS DOCUMENT IS DULY ISSUED UNDER THE LAWS OF THE STATE OF DELAWARE



Department of State

Division of Professional Regulation

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