

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE AND

CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "FRESENIUS

KABI PHARMACEUTICALS HOLDING, LLC" FILED IN THIS OFFICE ON THE

TWENTY-SEVENTH DAY OF DECEMBER, A.D. 2017, AT 1:55 O'CLOCK

P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE

OF THE AFORESAID CERTIFICATE OF FORMATION IS THE FIRST DAY OF

JANUARY, A.D. 2018.



Authentication: 203840757

Date: 12-27-17

## STATE of DELAWARE LIMITED LIABILITY COMPANY CERTIFICATE of FORMATION

• First: The name of the limited liability company is Fresenius Kabi  Pharmaceuticals Holding, LLC
1.1011110000010010 1.00101119, 1250
• Second: The address of its registered office in the State of Delaware is
251 Little Falls Drive in the City of Wilmington
Zip Code <u>19808</u> .
The name of its Registered agent at such address is Corporation Service Company
• Third: (Insert any other matters the members determine to include herein.)
The Certificate of Formation is to be effective as of
January 1, 2018.
In Witness Whereof, the undersigned have executed this Certificate of Formation this day of December , 2017 .
day of beechber , 2017
By: Jas B
Authorized Person(s)
Name: JACK C SILHULY
Typed or Printed

State of Delaware Secretary of State Division of Corporations Delivered 01:55 PM 12/27/2017 FILED 01:55 PM 12/27/2017 SR 20177792613 - File Number 4570638