

**STATE OF UTAH  
DEPARTMENT OF COMMERCE  
ACTIVE LICENSE**

**LoneStar Pharmaceuticals, Inc.**



**EFFECTIVE**  
02/26/2016

**EXPIRATION**  
09/30/2025

**REFERENCE NUMBER(S), CLASSIFICATION(S) & DETAIL(S)**

9708944-1710      Pharmacy - Class C

Wholesaler  
Distributor

**DBA:**      None Associated

**IMPORTANT LICENSURE REMINDERS:**

- Your license is valid until the expiration date listed on this form. Approximately 60 days prior to this expiration you will receive a renewal notice in the mail.
- Please note the address listed below. This is your public address of record for the division, and all future correspondence from the division will be mailed to this address. If you move, it is your responsibility to notify us directly of the change. Maintaining your current address with us is the easiest way to ensure continuous licensure.

LONESTAR PHARMACEUTICALS, INC.  
11951 HILLTOP RD BLDG 6 STE 18  
ARGYLE TX 76226

Please visit our web site at [www.dopl.utah.gov](http://www.dopl.utah.gov) should you have any questions in the future.

**STATE OF UTAH  
DEPARTMENT OF COMMERCE**

**DIVISION OF OCCUPATIONAL & PROFESSIONAL LICENSING**

**ACTIVE LICENSE**

**EFFECTIVE DATE:**      02/26/2016

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**ISSUED TO:**      LoneStar Pharmaceuticals, Inc.  
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