

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
KY Secretary of State  
Received and Filed

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Fee receipt: \$90.00

Michael G. Adams  
Secretary of State  
P. O. Box 718  
Frankfort, KY 40602-0718  
(502) 564-3490  
<http://www.sos.ky.gov>

Certificate of Authority

FBE

Pursuant to the provisions of KRS 14A.9 - 030 the undersigned hereby applies for authority to transact business in Kentucky on behalf of the entity named below and, for that purpose, submits the following statements.

1. The business entity is a **profit corporation**.
2. The name of the entity is: **TG THERAPEUTICS, INC.**
3. The state or country whose law the entity is organized is **Delaware**.
4. The date of organization is **5/18/1993** and the period of duration is **perpetual**.  
This Filing is Effective on Friday, March 22, 2024

**5. Principal Office**

343 Thornall St, Suite 740  
Edison, NJ 08837-5435

**6. Required Representatives**

<b>Officer</b>	Michael Weiss	260 Coconut Palm Boca Raton Road	FL	33432
<b>Officer</b>	Sean Power	3 Hudson Road Irvington East	NY	10533

**7. Registered Agent/Office**

Corporation Service Company  
421 West Main Street  
Frankfort, KY 40601

I, **Nicholas J. House**, consent to sign for **Corporation Service Company** who serves as the **Registered Agent** on behalf of this Entity.  
on Friday, March 22, 2024

As the Authorized Representative, I, **Sean Power**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **CFO**