

502 West Office Center Drive
Fort Washington, PA 19034
Phone: 215.461.2000
Fax: 215.461.2006
www.vitaepharma.com



RECEIVED
REGION 1

'05 FEB -9 P1:52

David Everhart
USNRC Region I
610 337-6936
February 7, 2005

37-30839-01
03036411

Dear Mr. Everhart,

This letter is in support of a Change in Name concerning License #133652 issued to Concurrent Pharmaceuticals on October 23, 2003. As of January 3, 2005 Concurrent Pharmaceuticals, 502 West Center Office Drive, Fort Washington, PA. has formally changed it's name to Vitae Pharmaceuticals. All other aspects of the company remain the same. In support of the name change, I have answered the six questions posed in Appendix F in the space below:

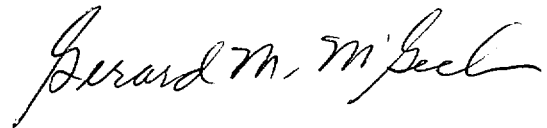
1. The change is simply a change of name. All officers, facilities, and operations remain as before the name change. Additional questions may be directed to Richard Harrison, RSO
Vitae Pharmaceuticals
502 West Office Center Drive
Fort Washington, PA 19034
215-461-2037
rharrison@viaterx.com
2. There is no change in any personnel or duties that relate to the license program
3. There are no changes in organization, location, facilities, equipments or procedures that relate to the licensed program

136447
NMSS/RONI MATERIALS-002

4. There are no changes in the surveillance programs associated with the name change
5. All records pertaining to the Concurrent Pharmaceuticals license will be kept by Vitae Pharmaceuticals
6. Vitae Pharmaceuticals will abide by all constraints, conditions, requirements and commitments made by Concurrent Pharmaceuticals concerning this license.

Please do not hesitate to contact me for any additional information.

Sincerely,

A handwritten signature in cursive script, reading "Gerard M. McGeehan". The signature is written in black ink and is positioned to the right of the "Sincerely," text.

Gerard M. McGeehan
V.P., Discovery Biology
Vitae Pharmaceuticals

This is to acknowledge the receipt of your letter/application dated

2/9/2005, and to inform you that the initial processing which includes an administrative review has been performed.

☒ Amend 37-30839-01 There were no administrative omissions. Your application was assigned to a technical reviewer. Please note that the technical review may identify additional omissions or require additional information.

☐ Please provide to this office within 30 days of your receipt of this card

A copy of your action has been forwarded to our License Fee & Accounts Receivable Branch, who will contact you separately if there is a fee issue involved.

Your action has been assigned Mail Control Number 136447.
When calling to inquire about this action, please refer to this control number.
You may call us on (610) 337-5398, or 337-5260.

BETWEEN:

License Fee Management Branch, ARM
and
Regional Licensing Sections

: (FOR LFMS USE)
: INFORMATION FROM LTS
: -----
:
: Program Code: 03620
: Status Code: 0
: Fee Category: 3M
: Exp. Date: 20131031
: Fee Comments: _____
: Decom Fin Assur Req'd: N
:

LICENSE FEE TRANSMITTAL

A. REGION I

1. APPLICATION ATTACHED

Applicant/Licensee: CONCURRENT PHARMACEUTICALS, INC.
Received Date: 20050209
Docket No: 3036411
Control No.: 136447
License No.: 37-30839-01
Action Type: Amendment

2. FEE ATTACHED

Amount: 1
Check No.: _____

3. COMMENTS

Signed Rebecca J. Ford
Date 2/16/2005

B. LICENSE FEE MANAGEMENT BRANCH (Check when milestone 03 is entered /__/)

1. Fee Category and Amount: _____

2. Correct Fee Paid. Application may be processed for:

Amendment _____
Renewal _____
License _____

3. OTHER _____

Signed _____
Date _____