| I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under |
|---|
| oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears  |
| above, or on an attachment with all other like empowered.   |

#### SIGNATURE: BENJAMIN CRAIG

Electronic Signature of Signing Officer/Director Detail

#### 06/07/2020 EXECUTIVE DIRECTOR

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

Date

Certificate of Status Desired: No

### Officer/Director Detail :

| Officer/Director Detail : |                               |                 |                               |  |
|---------------------------|-------------------------------|-----------------|-------------------------------|--|
| Title                     | Μ                             | Title           | Μ                             |  |
| Name                      | CRAIG, BENJAMIN               | Name            | BROWN, DEREK S                |  |
| Address                   | 701 S. HOWARD AVENUE, STE 246 | Address         | 701 S. HOWARD AVENUE, STE 246 |  |
| City-State-Zip:           | TAMPA FL 33606                | City-State-Zip: | TAMPA FL 33606                |  |
| Title                     | с                             | Title           | М                             |  |
| Name                      | MUEHLBACHER, AXEL             | Name            | LANCSAR, EMILY                |  |
| Address                   | 701 S. HOWARD AVE. STE 246    | Address         | 701 S. HOWARD AVE. STE 246    |  |
| City-State-Zip:           | TAMPA FL 33606                | City-State-Zip: | TAMPA FL 33606                |  |
| Title                     | М                             |                 |                               |  |
| Name                      | DE BEKKER-GROB, ESTHER        |                 |                               |  |
| Address                   | 701 S. HOWARD AVENUE, STE 246 |                 |                               |  |
| City-State-Zip:           | TAMPA FL 33606                |                 |                               |  |
|                           |                               |                 |                               |  |

## SIGNATURE:

Electronic Signature of Registered Agent

# **Current Principal Place of Business:**

701 S. HOWARD AVENUE, STE 346 TAMPA, FL 33606

**RESEARCH FOUNDATION, INC.** 

### **Current Mailing Address:**

701 S. HOWARD AVENUE, STE 346 TAMPA, FL 33606 US

### FEI Number: 46-4730583

### Name and Address of Current Registered Agent:

FRESH LEGAL PERSPECTIVE, PL 6930 W LINEBAUGH AVENUE TAMPA, FL 33625 US

Entity Name: INTERNATIONAL ACADEMY OF HEALTH PREFERENCE

### FILED Jun 07, 2020 Secretary of State 7167436326CC

Date