

2022 FLORIDA PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P14000026648

Entity Name: PRECHECK HEALTH SERVICES, INC.**Current Principal Place of Business:**100 BISCAYNE BLVD., #1212
MIAMI, FL 33132**Current Mailing Address:**848 BRICKELL AVE., PENTHOUSE 5
MIAMI, FL 33131 US**FEI Number:** 47-3170676**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.
801 US HWY 1
NORTH PALM BEACH, FL 33408 US*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.***SIGNATURE:** SEAN ARNO, SPECIAL SECRETARY

12/20/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CEO & BOARD MEMBER
Name	SAMUELSON, DOUG W.
Address	848 BRICKELL AVE., PENTHOUSE 5
City-State-Zip:	MIAMI FL 33131

Title	PRESIDENT AND CHAIRMAN
Name	GILLEN, FRANK
Address	848 BRICKELL AVE PENTHOUSE 5
City-State-Zip:	MIAMI FL 33131

Title	COO AND BOARD MEMBER
Name	PITTILLONI , FRANCIS
Address	848 BRICKELL AVE., PENTHOUSE 5
City-State-Zip:	MIAMI FL 33131

Title	CMO AND BOARD MEMBER
Name	GOODELL , YOLANDA
Address	848 BRICKELL AVE., PENTHOUSE 5
City-State-Zip:	MIAMI FL 33131

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FRANK GILLEN**PRESIDENT BY:** ARIANA TUROSKI, ATTORNEY-IN-FACT 12/20/2022

Electronic Signature of Signing Officer/Director Detail

Date