Electronic Signature of Signing Officer/Director Detail

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000060032

Entity Name: FACE-LIFE INSURANCE INC

Current Principal Place of Business:

11452 CITRA CIR 201 WINDERMERE, FL 34786

Current Mailing Address:

11452 CITRA CIR 201 WINDERMERE, FL 34786

FEI Number: 83-1219357

Name and Address of Current Registered Agent:

TERAN RUIZ, JOSE A 11452 CITRA CIR APT 201 WINDERMERE, FL 34786 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:

Electronic Signature of Registered Agent Officer/Director Detail ·

| Officer/Director Detail : | | | |
|---------------------------|-------------------------|-----------------|-------------------------|
| Title | Р | Title | VP |
| Name | TERAN RUIZ, JOSE A | Name | FIGUEREDO DAZA, MARIA G |
| Address | 11452 CITRA CIR APT 201 | Address | 11452 CITRA CIR APT 201 |
| City-State-Zip: | WINDERMERE FL 34786 | City-State-Zip: | WINDERMERE FL 34786 |

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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: JOSE A TERAN RUIZ

FILED Apr 25, 2019 Secretary of State 9715769015CC

Certificate of Status Desired: No

04/25/2019 Date

Date