

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000000241

Entity Name: MYRIAD WOMEN'S HEALTH, INC.**Current Principal Place of Business:**180 KIMBALL WAY
SAN FRANCISCO, CA 94080**Current Mailing Address:**180 KIMBALL WAY
SAN FRANCISCO, CA 94080 US**FEI Number:** 74-3238060**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Date

Officer/Director Detail :

Title DIRECTOR, PRESIDENT
Name LAMBERT, NICOLE
Address 180 KIMBALL WAY
City-State-Zip: SAN FRANCISCO CA 94080

Title DIRECTOR, CEO
Name DIAZ, PAUL J.
Address 180 KIMBALL WAY
City-State-Zip: SAN FRANCISCO CA 94080

Title TREASURER, DIRECTOR, CFO
Name RIGGSBEE, R. BRYAN
Address 180 KIMBALL WAY
City-State-Zip: SAN FRANCISCO CA 94080

Title AUTHORIZED SIGNER
Name JUSTIN, HUNTER
Address 180 KIMBALL WAY
City-State-Zip: SAN FRANCISCO CA 94080

Title SR. VICE PRESIDENT
Name ANCONA, MARGARET
Address 180 KIMBALL WAY
City-State-Zip: SAN FRANCISCO CA 94080

Title SECRETARY
Name WONG, PAMELA
Address 180 KIMBALL WAY
City-State-Zip: SAN FRANCISCO CA 94080

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: JUSTIN HUNTER**AUTHORIZED SIGNER****03/28/2022**

Electronic Signature of Signing Officer/Director Detail

Date