above, or on an attachment with all other like empowered.

SIGNATURE: MARK HEATWOLE

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# F22000001015

Entity Name: THERAMIND PRACTICE MANAGEMENT CORPORATION

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

1537 PIPER DUNES PLACE FERNANDINA BEACH. FL 32034

Current Mailing Address:

1537 PIPER DUNES PLACE FERNANDINA BEACH. FL 32034 US

FEI Number: 81-1850744

Name and Address of Current Registered Agent:

HEATWOLE, MARK M 1537 PIPER DUNES PL. FERNANDINA BEACH, FL 32034 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 :

PRESIDENT Title Name HEATWOLE, MARK M Address **1537 PIPER DUNES PLACE** City-State-Zip: FERNANDINA BEACH FL 32034

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

PRESIDENT

01/25/2023 Date

FILED Jan 25, 2023 Secretary of State 5724326528CC

Certificate of Status Desired: No

Date