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(Requestor's Name)	
(Address)	60033644
(Address)	0000011
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	11/07/1901018
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MARK



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: November 5, 2019

Order#: 035298-004

Re: APTUS HEALTH, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Erika Zavala Daza c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cho	inge is submitted for a corpo	502, 617.0502, 607.1508, or 617.1508, Florida Stat ration organized under the laws of the State of <u>DE</u> ice or registered agent, or both, in the State of Flor		
1 The name of	the corporation: APTUS HEA	ALTH, INC.		
2. The principal	office address: 395 Hudson	Street, New York, NY 10014		
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 12/01	/2011 Document number: F110000048	831	
	d street address of the current rtment of State: (If resigned,	registered agent and registered office on file with tenter resigned)	the	
	C T CORPORATION SYS	ГЕМ		
	1200 SOUTH PINE ISLANI	D ROAD		
	PLANTATION, FL 33324		201	
6. The name and (if changed):	d street address of the new re	gistered agent (if changed) and /or registered office	019 NOV -7	
	Corporation Service Compa	any	,	ز [
	1201 Hays Street		AM II:	Ħ
	Tallahassee	P.O. Box NOT acceptable FL 32301	22 TE	
The street address changed will	ess of its registered office an be identical.	d the street address of the business office of its rep	gistered agent,	
Such change wa authorized by th	as authorized by resolution de board, or the corporation l	luly adopted by its board of directors or by an office has been notified in writing of the change.	cer so	
-Kuly J	rg of an officer or director	Robert Johnson, Secretary		
I hereby accept I further agree to performance of agent. Or, if the hereby confirm	/ the appointment as register to comply with the provision my duties, and I am familian is document is being filed me	Printed or typed name and title ed agent and agree to act in this capacity. s of all statutes relative to the proper and complet with and accept the obligation of my position as erely to reflect a change in the registered office ad an notified in writing of this change.	te registered Idress, I	
By: Mac.	nature of Registered Agent	11/04/2019		
	half of an entity:	Date		
Grace E. Kirby,	Asst. Vice President			
Ty	ped or Printed Name			

* * * FILING FEE: \$35.00 * * *

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	ange is submitted for a cor	2.0502, 617.0502, 607.1508, or 617.1508, Florida Sporation organized under the laws of the State of	DE
	5 -	office or registered agent, or both, in the State of F	lorida.
1. The name of	the corporation: APTUS H	IEAETH, ING.	
2. The principa	I office address: 395 Hudso	on Street, New York, NY 10014	
3. The mailing	address (if different):		
4. Date of incom	rporation/qualification: 12/	/01/2011 Document number: F110000	04831
	nd street address of the curre artment of State: (If resigne	ent registered agent and registered office on file wi d, enter resigned)	th the
	C T CORPORATION SY	'STEM	
	1200 SOUTH PINE ISLA	AND ROAD	2
	PLANTATION, FL 33324	4	2019 NOV
6. The name an (if changed):		registered agent (if changed) and /or registered off	ice
	Corporation Service Con	npany	温量
	1201 Hays Street		1: 22
	Tallahassee	P.O. Box NOT acceptable	m i
		FL 32301	
The street addras changed will	ess of its registered office I be identical.	and the street address of the business office of its	registered agent,
Such change w authorized by t	as authorized by resolution he board, or the corporation	n duly adopted by its board of directors or by an con has been notified in writing of the change.	fficer so
Kulit		Robert Johnson, Secretary	
	uro of an officer or director	Printed or typed name and title	
I hereby accept I further agree performance of agent. Or, if th hereby confirm Corporatio	I the appointment as regist to comply with the provisi I my duties, and I am famil his document is being filed that the corporation has b on Service Company	tered agent and agree to act in this capacity. I cons of all statutes relative to the proper and complian with and accept the obligation of my position merely to reflect a change in the registered office been notified in writing of this change.	olete as registered address, I
By: War	. t-Kuby	11/04/2019	
Sig	enature of Registered Agent	Date	
If signing on be	chalf of an entity:		
Grace E. Kirby	, Asst. Vice President		
T	yped or Printed Name		

* * * FILING FEE: \$35.00 * * *