

2014 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F13000003979

FILED
Oct 07, 2014
Secretary of State

Entity Name: CSS HEALTH TECHNOLOGIES, INC.

Current Principal Place of Business:

5200 MARYLAND WAY
SUITE 310
BRENTWOOD, TN 37027

New Principal Place of Business:

Current Mailing Address:

5200 MARYLAND WAY
SUITE 310
BRENTWOOD, TN 37027

New Mailing Address:

FEI Number: 62-1214738

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PEERER, NOLLIE E
349 WIND RUSH LOOP
TARPON SPRINGS, FL 34689 US

Name and Address of New Registered Agent:

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: NOLLIE E PEERER

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C
Name: BYRUM, JOE
Address: 5200 MARYLAND WAY #310
City-St-Zip: BRENTWOOD, TN 37027

Title: P
Name: HOWERTON, EDWIN D II
Address: 5200 MARYLAND WAY #310
City-St-Zip: BRENTWOOD, TN 37027

Title: D
Name: PRYOR, JOHN
Address: 5200 MARYLAND WAY
City-St-Zip: BRENTWOOD, TN 37027

Title: D
Name: FOSTER, MARK
Address: 5200 MARYLAND WAY
City-St-Zip: BRENTWOOD, TN 37027

Title: CEO
Name: SHERBACK, CHRIS
Address: 5200 MARYLAND WAY
City-St-Zip: BRENTWOOD, TN 37027

Title: VP
Name: GIBSON, TAMMY
Address: 5200 MARYLAND WAY
City-St-Zip: BRENTWOOD, TN 37027

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: EDWIN D HOWERTON

PRES

10/07/2014

Electronic Signature of Signing Officer or Director

Date