

8/1/22, 12:29 PM

Division of Corporations

Florida Department of State
 Division of Corporations
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To:
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 Fax Number : (850)617-6380

From:
 Account Name : C T CORPORATION SYSTEM
 Account Number : FCA000000023
 Phone : (954)208-0845
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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 TALLAHASSEE, FL

REGISTERED AGENT CHANGE ZERIGO HEALTH, INC.

Certificate of Status	0
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A. BUTLER

AUG 1 2022

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

Pursuant to the provisions of sections 607.0502, 607.0502, 607.1508, or 607.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Delaware in order to change its registered office or registered agent, or both, in the State of Florida

1. The name of the corporation: ZENICO HEALTH INC

2. The principal office address: 1361 Hjh Bluff D Suite 300 San Diego CA 92101

3. The mailing address (if different):

4. Date of incorporation/qualification: 12/12/2018 Document number: F18000672

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State. (If resigned, enter resigned)

PARACORP INCORPORATED
65 OFFICER LAYA DRIVE, 1ST FLOOR
TALLAHASSEE, FL 32301

6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):

CI Corporation System
120 South Pine Hurd Road
Tallahassee, Florida 32301

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TALLAHASSEE, FL

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer(s) authorized by the board, or the corporation has been notified in writing of the change.

Robert Exeter
Robert Exeter VP FINANCE

Thereby accept the appointment as registered agent and agree to act in this capacity; further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

By: Denise Bell
Denise Bell, Asst Secy
State of Registered Agent

6/21/2022
Date

If signing on behalf of an entity:
Denise Bell, Asst Secy
Typed or Printed Name

*** FILING FEE \$35.00 ***