

2014 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P09000005894

FILED
Jan 13, 2014
Secretary of State

Entity Name: XACT HEALTH CARE SOLUTIONS INC.

Current Principal Place of Business:

272 SOUTHWEST ELDERBERRY DRIVE
PORT SAINT LUCIE, FL 34953

New Principal Place of Business:

Current Mailing Address:

272 SOUTHWEST ELDERBERRY DRIVE
PORT SAINT LUCIE, FL 34953

New Mailing Address:

FEI Number: 36-4647963

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: SPIEGEL & UTRERA, P.A.

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPST
Name: BONNER
Address: 272 SOUTHWEST ELDERBERRY DRIVE
City-St-Zip: PORT SAINT LUCIE, FL 34953

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: DARIA L BONNER

CEO

01/13/2014

Electronic Signature of Signing Officer or Director

Date