2012 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Aug 02, 2012
Secretary of State

DOCUMENT# P96000092272

Entity Name: DELTA HEALTH MANAGEMENT INC.

Current Principal Place of Business:

1 DOCTORS LANE
LAKE WALES, FL 33853

New Principal Place of Business:

Current Mailing Address:

1 DOCTORS LANE
LAKE WALES, FL 33853

New Mailing Address:

FEI Number: 59-3398671 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEAVER, M. MAX
1 DOCTORS LANE
LAKE WALES, FL 33853 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: M. MAX WEAVER,DDS

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P
Name: WEAVER, M M
Address: 1 DOCTORS LANE
City-St-Zip: LAKE WALES, FL 33853

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: M. MAX WEAVER, DDS OWNE 08/02/2012

Electronic Signature of Signing Officer or Director — Date