above, or on an attachment with all other like empowered. 01/10/2017

SIGNATURE: RENEE GORDEN

Electronic Signature of Signing Officer/Director Detail

BOCA RATON. FL 33431 US FEI Number: 90-0907945

Name and Address of Current Registered Agent:

GORDEN, RENEE 6361 WALK CIRCLE BOCA RATON, FL 33431 US

DOCUMENT# P12000058349

Current Mailing Address:

6361 WALK CIRCLE

6361 WALK CIRCLE BOCA RATON, FL 33431

Current Principal Place of Business:

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: RENEE GORDEN

Electronic Signature of Registered Agent

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: RENEE GORDEN HEALTH CHOICE AMERICA, INC.

Officer/Director Detail :

| Title | Р |
|-----------------|---------------------|
| Name | GORDEN, RENEE |
| Address | 6361 WALK CIRCLE |
| City-State-Zip: | BOCA RATON FL 33431 |

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

Certificate of Status Desired: No

01/10/2017

Date

FILED Jan 10, 2017 Secretary of State

CC7446959116

PRINCIPAL

Date