| Entity Name: M&M DISABILITY MANAGEMENT, INC. | |
|--|--|
| Current Principal Place of Business: | |

20 N. ORANGE AVENUE, SUITE 1600 ORLANDO, FL 32801

DOCUMENT# P14000100313

Current Mailing Address:

20 N. ORANGE AVENUE, SUITE 1600 ORLANDO, FL 32801

FEI Number: 47-2578248

Name and Address of Current Registered Agent:

WHWW, INC. 329 PARK AVENUE NORTH SECOND FLOOR WINTER PARK, FL 32789 US

FILED Jan 13, 2024

Secretary of State

7976678405CC

Date

Certificate of Status Desired: No

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:

Electronic Signature of Registered Agent

Officer/Director Detail :

| Title | Ρ | Title | VP |
|-----------------|---------------------------------|-----------------|---------------------------------|
| Name | MOSKOWITZ, REUVEN | Name | CLEM, ALEXANDER |
| Address | 20 N. ORANGE AVENUE, SUITE 1600 | Address | 20 N. ORANGE AVENUE, SUITE 1600 |
| City-State-Zip: | ORLANDO FL 32801 | City-State-Zip: | ORLANDO FL 32801 |

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: ALEXANDER CLEM

VP

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Electronic Signature of Signing Officer/Director Detail

Date