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: | JOHAN VEGA | FERNANDEZ |
|------------|------------|-----------|

Current Principal Place of Business:

DOCUMENT# P21000011538

7875 SW 104 ST SUITE 202 MIAMI, FL 33156

Current Mailing Address:

7875 SW 104 ST SUITE 202 MIAMI, FL 33156 UN

FEI Number: 86-2029025

Name and Address of Current Registered Agent:

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: GOOD SLEEP STUDY CENTER, INC.

VEGA, JOHAN 3121 SW 140TH AVE MIAMI, FL 33175 US

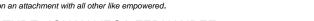
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

| Title | MGR | Title | MGR |
|-----------------|-------------------|-----------------|------------------|
| Name | VEGA, JOHAN | Name | SUAREZ, JOSE |
| Address | 3121 SW 140TH AVE | Address | 9833 SW 157TH CT |
| City-State-Zip: | MIAMI FL 33175 | City-State-Zip: | MIAMI FL 33196 |



Electronic Signature of Signing Officer/Director Detail

MGR

Date

FILED Apr 09, 2024 Secretary of State 6410492658CC

Certificate of Status Desired: No