

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000079625

Entity Name: ORTHOMEDX CORPORATION

Current Principal Place of Business:

4629 36TH ST.
#800
ORLANDO, FL 32811

Current Mailing Address:

4629 36TH ST.
#800
ORLANDO, FL 32811 US

FEI Number: 59-3276029

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRALEY, JOHN A
8817 CYPRESS RESERVE CIR.
ORLANDO, FL 32836 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: JOHN A. FRALEY

01/09/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name FRALEY, JOHN A
Address 8817 CYPRESS RESERVE CIRCLE
City-State-Zip: ORLANDO FL 32836

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: JOHN A. FRALEY

PD

01/09/2017

Electronic Signature of Signing Officer/Director Detail

Date