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: RAMON CORTADA	PSTD	04/18/2022

Electronic Signature of Signing Officer/Director Detail

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000004947

Entity Name: TELEMEDICAL ORGANIZATION, INC.

Current Principal Place of Business:

2050 N.E. 163RD STREET NORTH MIAMI BEACH, FL 33162

Current Mailing Address:

8390 SW 72 AVENUE 906 MIAMI, FL 33143 US

FEI Number: 65-0905446

Name and Address of Current Registered Agent:

CORTADA, RAMON 8390 SW 72 AVENUE 906 MIAMI, FL 33143 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	PSTD	Title	D
Name	CORTADA, RAMON PSTD	Name	NOLAN, DAVID D
Address	8390 SW 72 AVENUE 906	Address	8390 SW 72 AVENUE 906
City-State-Zip:	MIAMI FL 33143	City-State-Zip:	MIAMI FL 33143

Certificate of Status Desired: Yes

FILED Apr 18, 2022 Secretary of State 6461928911CC

Date

Date