

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000084977

Entity Name: ONE HEALTH SOLUTIONS, LLC

Current Principal Place of Business:

235 CENTRAL AVENUE
HOLLAND, MI 49423

Current Mailing Address:

235 CENTRAL AVE
HOLLAND, MI 49423 US

FEI Number: 27-4590323

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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

Date

Authorized Person(s) Detail :

| | | | |
|-----------------|-------------------------|-----------------|------------------|
| Title | MGR | Title | MGR |
| Name | ARCHAMBAULT, MIKE G | Name | WIERDA, ANDREW C |
| Address | 100 NE 3RD AVENUE | Address | 235 CENTRAL AVE |
| City-State-Zip: | FT. LAUDERDALE FL 33301 | City-State-Zip: | HOLLAND MI 49423 |

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANDREW WIERDA

MANAGING DIRECTOR

01/24/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date