

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000000341

Entity Name: ASSUREX HEALTH, INC.**Current Principal Place of Business:**6960 CINTAS BLVD.
MASON, OH 45040**Current Mailing Address:**322 N. 2200 WEST
SALT LAKE CITY, UT 84116 US**FEI Number:** 27-1453375**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
C/O C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Officer/Director Detail :

Title DIRECTOR
Name LEFFLER, SCOTT
Address 6960 CINTAS BLVD.
City-State-Zip: MASON OH 45040

Title CHIEF COMMERCIAL OFFICER
Name VERRATTI, MARK S.
Address 6960 CINTAS BLVD.
City-State-Zip: MASON OH 45040

Title DIRECTOR
Name DIAZ, PAUL J.
Address 6960 CINTAS BLVD.
City-State-Zip: MASON OH 45040

Title SVP, CHIEF OF STAFF
Name ANCONA, MARGARET
Address 6960 CINTAS BLVD.
City-State-Zip: MASON OH 45040

Title GENERAL MANAGER,
NEUROSCIENCE
Name FANTAZZIA, FREDERICK
Address 6960 CINTAS BLVD.
City-State-Zip: MASON OH 45040

Title VP, ASSOCIATE GENERAL COUNSEL
& ASSISTANT SECRETARY
Name MANIACI, MICHAEL J.
Address 6960 CINTAS BLVD.
City-State-Zip: MASON OH 45040

Title DIRECTOR
Name VERRATTI, MARK S.
Address 6960 CINTAS BLVD.
City-State-Zip: MASON OH 45040

Title SVP, LEGAL AFFAIRS & CORPORATE
SECRETARY
Name HUNTER, JUSTIN
Address 6960 CINTAS BLVD.
City-State-Zip: MASON OH 45040

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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: MICHAEL J. MANIACIVP, ASSOCIATE
GENERAL COUNSEL &
ASSISTANT SECRETARY

03/18/2025

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title PRESIDENT/CEO
Name DIAZ, PAUL J.
Address 6960 CINTAS BLVD.
City-State-Zip: MASON OH 45040

Title CHIEF TECHNOLOGY OFFICER
Name HAAS, KEVIN
Address 6960 CINTAS BLVD.
City-State-Zip: MASON OH 45040

Title CHIEF SCIENTIFIC OFFICER
Name MUZZEY, DALE
Address 6960 CINTAS BLVD.
City-State-Zip: MASON OH 45040

Title CFO & TREASURER
Name LEFFLER, SCOTT
Address 6960 CINTAS BLVD.
City-State-Zip: MASON OH 45040

Title CHIEF PEOPLE OFFICER
Name SOLAIMAN, SHEREEN
Address 6960 CINTAS BLVD.
City-State-Zip: MASON OH 45040

Title EVP, STRATEGY AND BUSINESS
 DEVELOPMENT
Name BURKE, PATRICK
Address 6960 CINTAS BLVD.
City-State-Zip: MASON OH 45040

Title SVP, PAYOR MARKETS & ASSISTANT
 SECRETARY
Name HO, CHRISTOPHER
Address 6960 CINTAS BLVD.
City-State-Zip: MASON OH 45040

Title CHIEF ACCOUNTING OFFICER
Name MUNK, NATALIE
Address 6960 CINTAS BLVD.
City-State-Zip: MASON OH 45040

Title COO
Name RAHA, SAMRAAT S.
Address 6960 CINTAS BLVD.
City-State-Zip: MASON OH 45040

Title CFO, OPERATIONS
Name WHEELER, BEN
Address 6960 CINTAS BLVD.
City-State-Zip: MASON OH 45040